## M 19000001631

(Requestor's Name)					
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(Address)					
(Ci	ty/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL			
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Account#: I20000000088

Date:	01/17/2023	•.			
	Merritt Walke	er			
Reference #	188410	6			
Entity Name	:TF	JACKSONVI	ILLE FL LLC		
	es of Incorporation/Au				
Amer Amer	ndment				
✓ Change of Agent					
Reinstatement					
Conversion					
☐ Merger					
☐ Dissolution/Withdrawal					
Fictiti	ous Name				
Other					
Authorized A	Amount:	\$25	_		
Signature: _	V	nw	_		

F: 800.944.6607

F: +852.2682.9790

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company:TF_JACKS	SONVILLE F	FL LLC		
2. (a)	5407 Trillium Boulevard Suite B120	(b) <sup>5</sup>	(b) 5407 Trillium Boulevard Suite B120		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Hoffman Estates IL 60192	<u>-</u>	loffman Estates IL 60192		
	February 14, 2019		M19000001631		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a					
	Registered Agent and Registered Office shown on the records	of the Florida De	pt. of State:		
	1200 South Pine Island Road				
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)	20		
			23		
	Plantation	FL_33324	2023 JAN 17		
(b)	COGENCY GLOBAL INC.				
( ,	Enter name of NEW Registered Agent and/or NEW Registe	red Office addre	AH 1.		
	115 North Calhoun St., Suite 4				
	NEW Registered Office Address:				
	Tallahassee	<sub>FL</sub> 32301			
the chagent was/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street in the control of the control of the control of the operating agreement of the control	of the register Hiability comprise of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in		
	uke Valentino	Luke V	'alentino		
_	ature of a member or authorized representative of a member		Printed or typed name of signee		
I here provis the ob- to men notific	eby accept the appointment as registered agent and vious of all statutes relative to the proper and completions of my position as registered agent as proverly reflect a change in the registered office address, and in writing of this change.	agree to act in etc performand ided for in Cha , Thereby conf	this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept upter 605, F.S. Or, if this document is being filed irm that the limited liability company has been		
	imothy Mayville				
Signat	ure of Registered Agent				

Timothy Mayville, Assistant Secretary

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00