

11/11/22, 2:09 PM

Division of Corporations

Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6383

From:  
Account Name : LEGALINC CORPORATE SERVICES INC.  
Account Number : I20180000011  
Phone : (844)386-0178  
Fax Number : (214)317-4754

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT CHANGE  
TOWERS ADMINSTRATORS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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NOV 15 2022  
K. Brumley

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

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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. Name of the limited liability company: Towers Administrators LLC

2. (a) Principal office address of limited liability company  
(Note: MUST BE STREET ADDRESS)  
4510 Cox Rd , Ste 111  
Glen Allen, VA, US, 23060

(b) Mailing address of limited liability company  
(Note: MAY BE POST OFFICE BOX)  
99 High Street., Suite 2800,  
Boston, MA, US, 02110

3. Date of filing/registration in Florida 04-11-2019 4. Document number M19000003669

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State  
CORPORATION SERVICE COMPANY  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
1201 HAYS STREET  
TALLAHASSEE, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address  
LEGALINC CORPORATE SERVICES INC.  
NEW Registered Office Address  
476 Riverside Ave  
Jacksonville, FL 32202

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TALLAHASSEE, FLORIDA  
CLERK OF CIRCUIT COURT

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Joe Kern  
Signature of a member or authorized representative of a member

Joe Kern, Manager  
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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