

Electronic Filing Menu Corporate Filing Menu



irsua. bmits	nt to the provisions of sections 605.0114 or 605. the following statement in order to change it	0116, Florida Statu s registered office	ites, the undersign or registered age	ed limited liability comp ent, or both, in the State	
oriad	me of the limited liability company:				
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y:	(b)		
	2288 Blue Water Blvd, Ste 323	2288	2288 Blue Water Blvd, Ste 323		
	Odenton, MD 21113	Oder	Odenton, MD 21113		
	04/16/2019	M190	M1900003856		
	Date of filing/registration in Florida	4.	Document n	umber	
	CORPORATION SERVICE COMPANY				
	Registered Agent and Registered Office shown on the record	rds of the Florida Dept.	file Florida Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201 HAYS STREET				
	TALLAHASSEE	, FL			
	C T Corporation System			STATE	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			□] (0 ,)	
	NEW Registered Office Address:				
	1200 South Pine Island Road				
	Plantation	_, FL			
e cha: enț w 1s/we	mited liability company is not organized under the nge or changes are made, the Florida street addre will be identical. Or, in the case of a Florida limit re authorized by an affirmative vote of the membrane cles of organization or the operating agreement of	ne laws of the State ass of the registered ted liability company pers of the limited li of the limited liability	office and the bus by, it is hereby con- iability company o	iness office of the registe firmed that the change(s) r as otherwise provided i	

By: Michael Jerisphin Signature of Registered Agent Michael Scraphin, Asst. Secretary

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