M19000003929

(Requestor's Name)						
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PICK-UP WAIT MAIL						
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(Document Number)						
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2022 MAR 24 PM

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195							
REFERENCE : 568530 7877278							
AUTHORIZATION : Spelle was							
COST LIMIT : \$ 25.00							
ORDER DATE: March 23, 2022							
ORDER TIME: 11:34 AM							
ORDER NO. : 568530-001							
CUSTOMER NO: 7877278							
CHANGE OF AGENT							
NAME: BENCHMARK ADMINISTRATORS, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker							
EXAMINER'S INITIALS:							

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.	Name of the limited liability company: BENCHMARK ADMINISTRATORS, LLC					
2.	(a)	875 CONCOURSE PKWY S	(ь) Р.О. ВС	X 940097	
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	'	., <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		STE 160				
		MAITLAND, FL 32751		MAITLAI	ND, FL 32794	
		04/15/2019		M1900000	03929	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	URS AGENTS, LLC				
٥.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of S 3458 LAKESHORE DR			ate:	
		Registered Office Address (MUST BE FLORIDA STREET)	1DDRES	12 29		
		TALLAHASSEE FL	32312			
					•	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	od Agent and/or NEW Registered Office address:		- :	
ested tiame of Annual Registered Agent and of Annual Registered Office address.						
	Corporation Service Company NEW Registered Office Address:					
					_	
		1201 Hays Street			_	
		Tallahassee, FL	32301		_	
cha age was	inge int w s/we	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of the organization or the operating agreement of the	register bility co f the lin	ed office ar ompany, it i nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
/S/ Julie Baron			Juli	Julie Baron, Authorized Person		
Signature of a member or authorized representative of a member					Printed or typed name of signee	
pro the to n	visio obli nere	y accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address. I have the change in the registered office address. I have the change in the registered of the change.	ee to ac. perform I for in (ereby c	t in this cap ance of my Chapter 60, onfirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been	
Sig	<u>人)</u> natur	of Registered Agent				
Gr	ace	E. Kirby, Asst. Vice President				

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