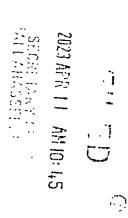
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(Requestor's Name)							
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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 631015 8128292 AUTHORIZATION : COST LIMIT ORDER DATE: April 3, 2023 ORDER TIME : 1:37 PM ORDER NO. : 631015-220 CUSTOMER NO: 8128292 _____ CHANGE OF AGENT NAME: INDUSTRIOUS TPA 615 CHANNELSIDE DRIVE LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: ___ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Alexxis Weiland-sorenson

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.

I. Na	ame of the limited liability company: INDUSTRIOUS	TPA 61	15 CF	IANNE	LSIDE DRIV	E LLC			
2. (a)	215 PARK AVE S. FL 13TH	-	(b) 215 PARK AVE S. FL 13TH						
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	`	(0)_		Mailing addres		· · · · · · · · · · · · · · · · · · ·	•	
	NEW YORK, NY 10003	_	N	EW YO	ORK, NY 10003				
	08/01/2019		М1	900000	7524	م سم	2023 APR		
3.	Date of filing/registration in Florida	4.			Document	number :	港景	: 1	
5. (a)	National Registered Agents, Inc.								
	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET A		_	ot. of Stai	 -			う フ	
	PLANTATION . FL	33324			_				
	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address:				_				
	1201 Hays Street				_				
	Tallahassee, FL	32301			_				
change agent w was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the /S/ Jill Cilmi	register bility c f the lin limited	red o compa mited liabi	ffice an any, it is liabilit lity con	d the busine s hereby con y company c	ss office of firmed the or as othe	of the regis at the char rwise prov	stered ige(s)	
Signal	ture of a member or authorized representative of a member	<u></u>			Printed or typ				
provisi the obl to mere notified Signatur	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have been the first than the conference of Registered Agent	ee to ac perform I for in ereby c	et in t nance Chaj confir	his cap of my oter 605 m that	acity. I furth duties, and I d. F.S. Or, if the limited h	ier agree am famil This doci iability co	to comply iar with an ment is be impany ha.	with the nd accept ing filed s been	
Grat	ce E. Kirby, Asst. Vice President \(\) Division of Corporations \(\) P.O. I	30x 632	27• T	allaha	ssee, FL 323	314			

FILING FEE: \$25.00