M20000004813

(Re	questor's Name)		_
(Ad	dress)		
,	,		
(Ad	dress)		
(Cit	y/State/Zip/Phone #)	<u>-</u>	
PICK-UP	WAIT	MAIL	
(Bu	siness Entity Name)		
(Do	cument Number)		
ie i Copies	Certificates o	of Status	
-cial Instructions to Filin	ng Officer:		

Office Use Only



300401250793





A. BUTLER FEB T 6 2023



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date: Februar	y 03, 2023		Accounts. 12000000000
Name: James	Brodbeck		
Reference #:	1888262		
Entity Name:	EVERGREE	N LIVING, LLC	
Articles of Incor	poration/Authoriz	ation to Transact Busin	ess
Amendment			
Change of Age	nt		
Reinstatement			
☐ Conversion			
☐ Merger			
☐ Dissolution/With	ndrawal		
☐ Fictitous Name			
Other			
Authorized Amoun	i: \$25.0	0	
Signature:			

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOLIMITED LIABILITY COMPANY

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

Principal office address of limited liability compan	(b)_	Mailing address of limited liability company:
(<u>Note: MUST BE STREET ADDRESS</u>)	,	(Note: MAY BE POST OFFICE BOX)
No Change		No Change
May 28, 2020		M20000004813
Date of filing/registration in Florida	4.	Document number
universal registered agents i	NC	
Registered Agent and Registered Office shown on the reco	rds of the Florida D	ept, of State;
1317 CALIFORNIA ST		
Registered Office Address (MUST BE FLORIDA STR	REET ADDRESS)	
Tallahasee	32304	2023 FEB
COGENCY GLOBAL INC.		- 1 m 1 m 1 m
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regi</u>	stered Office addre	<u> </u>
115 North Calhoun St., Suite 4		
NEW Registered Office Address:		<u> </u>
Tallahassaa	32301	
Tallahassee	_, _{FL_} 32301	
e limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limitwere authorized by an affirmative vote of the members of organization or the operating agreement of	ess of the registe ted liability com bers of the limite	red office and the business office of the regis pany, it is hereby confirmed that the change(sed liability company or as otherwise provided
Adam Davidson		Davidson
enature of a member or authorized representative of a member		Printed or typed name of signee

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 accepted obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being file 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.

/s/ Timothy Mayville

Signature of Registered Agent