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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: January 12, 2021

Order#: 592841-269

Re: PALM RETREAT, LLC

Enclosed please find:

XX \_\_ Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX \_\_\_ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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. Na	me of the limited liability company:	AT, LLC	
2. (a)	8403 Colesville Road	(b)	
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Silver Spring, MD 20910		
	05/28/2020	M2000	00004814
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T Corporation System		
., (u)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1200 South Pine Island Road		State: 2021 JAN
	Registered Office Address (MUST BE FLORIDA STREET	IDDRESS)	
	Plantation, FI	33324	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	d Office address:	<u> </u>
	NEW Registered Office Address:		<del></del>
	1201 Hays Street		
	Tallahassee, F)	L	
change agent v was/we	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered offic ability company of the limited lia	te and the business office of the registered that the change(s) ability company or as otherwise provided in
/s/ Jill	Cilmi	Jill Cilmi, A	authorized Person
-	ture of a member or authorized representative of a member		Printed or typed name of signee
I herei provisi the obl to mere notified	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. It in writing of this rhange.	ree to act in this performance of d for in Chapter hereby confirm (	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed that the limited liability company has been
	en Mel	Corporation Ser	rvice Company
Signatu	re of Registered Agent	Ami M. Casper	, Asst. Vice President

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