M20000011458

	(Requestor's Name)					
(Address)						
(Address)						
	(City/State/Zip/Phone #)					
PICK-UF	P WAIT MAIL					
	(Business Entity Name)					
(Document Number)						
Certified Copies	Certificates of Status					
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TALLAHASSEE, FLORIO

RAROCHS

JAN 1.1 1921 I ALBRITTON CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE

8329413

AUTHORIZATION

COST LIMIT

ORDER DATE: January 6, 2022

ORDER TIME : 9:39 AM

ORDER NO. : 365129-031

CUSTOMER NO: 8329413

CHANGE OF AGENT

NAME:

RED KNIGHT SKYTAIN - LAUREL

PARK LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

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. N	ame of the limited liability company: RED KNIGH	IT SKYTAIN	- LAUREL	PARK LLC	
2. (a)		(o)		
` , ,	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	:	,	Mailing address of limited (Note: MAY BE POS)	
	53 SPRING VALLEY ROAD		53 SPRII	NG VALLEY ROAD	
	MORRISTOWN, NJ 07960		MORRISTOWN, NJ 07960		
	12/10/2020		M200000	11458	
3.	Date of filing/registration in Florida	4,		Document number	
5. (a)					
	Registered Agent and Registered Office shown on the record Registered Agents Inc.	ls of the Florid	a Dept. of Stat	te:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
	7901 4th St N STE 300			_	207?
	St. Petersburg	. FL ³³⁷⁰²		-	-
		.rL		_	-1
(b)					0 .
(0)	Enter name of NEW Registered Agent and/or NEW Regist	ered Office ac	ldress:	_	
					8: -
	Corporation Service Company			_	9
	NEW Registered Office Address:				
	1201 Hays Street	_		_	
	Tallahassee	. FL ³²³⁰¹			
change agent was/w	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membe icles of organization or the operating agreement of	the register d liability co ers of the lin	ed office an ompany, it i nited liabilit	d the business office s hereby confirmed they company or as othe	of the registered nat the change(s)
	Xie E. Cienie	Jill	Cilmi, Autho	orized Person	
Signa	ature of a member or authorized representative of a member			Printed or typed name o	f signee
provis the ob to mer	by accept the appointment as registered agent and tons of all statutes relative to the proper and compligations of my position as registered agent as provely reflect a change in the registered office address d in writing of this change.	agree to act lete perform ided for in (c. I hereby co	in this cap ance of my Chapter 603 onfirm that	acity. I further agree duties, and I am fami 5, F.S. Or, if this doc the limited liability ca	to comply with the liar with and accept ument is being filed ompany has been
	ure of Registered Agent E. Kirby, Asst. Vice President				