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Division of Corporations

: (850)617-6383 Fax Number

From:

Account Name : COMPUTERSHARE Account Number : 110432303053 Phone : (561)694-8107 Fax Number : (561)214-8442

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

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LLC REGISTERED AGENT CHANGE CELEBRATION POINTE (DE) LLC

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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	ame of the limited liability company: CELEBRATIC	ON POINTI	ELLC	
2. (a)		(b)	
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			duiling address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	6031 Connection DriveSte 200		300 N Maii	n StreetSte 402
	Irving, TX 75039		Greenville.	SC 29601
	01/04/2021		M210000000	032
3.	Date of filing/registration in Florida	4.		Document number
5. (a)				
J. (a)	Registered Agent and Registered Office shown on the records	of the Floric	la Dept, of State	- ::
	CT Corporation System			
	Registered Office Address (MUST BE FLORIDA STREET	ET ADDRES	<u>S)</u>	
	1201 HAYS STREET			
	TALLAHASSEE	32301		•
		FL		
(b)				
10)	Enter name of NEW Registered Agent and/or NEW Registe	red Office a	ddress:	
	United Agent Group Inc.			
	NEW Registered Office Address:			
	801 US Highway 1			
	Corros Friguesia, 1			
	North Palm Beach	FL 33408		
change agent v was/we the arti	imited liability company is not organized under the or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the street in the control of the operating agreement o	laws of the the register l liability of rs of the lin the limited	red office and ompany, it is nited liability liability com	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
	my Meeker ture of a member or authorized representative of a member		many wiccki	er, Attorney-in-Fact Printed or typed name of signee
I here provisi the obl to mere	by accept the appointment as registered agent and completions of all statutes relative to the proper and completigations of my position as registered agent as proviely reflect a change in the registered office address, d in writing of this change.	agree to ac de perform ded for in Thereby c	t in this capa ance of my d Chapter 605, confirm that t	ecity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been
	any Meeker Tiffany Meeker, Special Secretary			
Signatu	re of Registered Agent			