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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 212029 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE: May 5, 2025 ORDER TIME : 2:50 PM ORDER NO. : 212029-034 CUSTOMER NO: 8476616 CHANGE OF AGENT NAME: LAKE WALES MHC, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _____ CERTIFIED COPY _____ PLAIN STAMPED COPY CONTACT PERSON: Shauna Godbolt

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.	Name of the limited liability company: LAKE	WALES MHC, LLC	
2. (a			
	(a) Principal office address of limited liability cor (Note: MUST BE STREET ADDRESS	mpany:	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	10221 RIVER ROAD #59831	_	1 RIVER ROAD #59831
			<u> </u>
	POTOMAC, MD 20859 POTOMAC, MD 20859		DMAC, MD 20859
	05/20/2021	M2100	0006161
3.	Date of filing/registration in Florida	4.	Document number
5. ((a)		
.). (Registered Agent and Registered Office shown on the	records of the Florida Dept. of	State:
	WYSS, JONATHAN		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	3191 GRAND AVE #331774		~~ _
	MIAMI	_{EL} 33133	025
		, 1 L	
(1	(b)		53 F
`	Enter name of NEW Registered Agent and/or NEW Registered Office address:		2025 MEL 12 AH C
			= U
	Corporation Service Company		<u> </u>
NEW Registered Office Address:			
	1201 Hays Street		
	Tallahassee	, FL 32301	
char ager was, the a /S/	ne limited liability company is not organized unonge or changes are made, the Florida street address will be identical. Or, in the case of a Florida stwere authorized by an affirmative vote of the narticles of organization or the operating agreemed Austin Berk	der the laws of the State of ess of the registered offic limited liability company, nembers of the limited lia ent of the limited liability	e and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in
Signature of a member or authorized representative of a member		nber	Printed or typed name of signee
prov the a to m	ereby accept the appointment as registered agen visions of all statutes relative to the proper and obligations of my position as registered agent a nerely reflect a change in the registered office a ified in writing of this change.	nt and agree to act in this complete performance of s provided for in Chapter ddress, I hereby confirm t	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 hat the limited liability company has been
Sign	nature of Registered Agent		

Grace E. Kirby, Asst. Vice President

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