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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 620741 8374407 AUTHORIZATION, ORDER DATE: March 29, 2023 ORDER TIME : 9:46 AM ORDER NO. : 620741-048 CUSTOMER NO: 8374407 CHANGE OF AGENT NAME: TAILWIND TALLAHASSEE, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY
XX PLAIN STAMPED COPY CONTACT PERSON: Alexxis Weiland-sorenson 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.	Na	ame of the limited liability company: TAILWIND TALL	AHAS	SE	E, LLC			
2.	(a)	530 SOUTH FRONT STREET STE 100		(b)	530 SOU	TH FRONT STREET S	STE 100	
	()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	` - /		Mailing address of limited I (Note: MAY BE POST O	-	
		MANKATO, MN 56001	_		MANKAT	O, MN 56001		
		06/11/2021	_	l	M2100000	7272		
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: C T CORPORATION SYSTEM				e:		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_		
		1200 SOUTH PINE ISLAND ROAD						
		PLANTATION	33324	,		-	~3	
		FL_				_	2023 AFR	
	(b)						<u> </u>	₩.
	, ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office a	ıdd	ress:	_	ι ω	147
		Corporation Service Company						
		NEW Registered Office Address:				-	AH IO:	V==
		1201 Hays Street					-3	
		Tallahassee	32301					
cha age wa	ange ent w s/we	imited liability company is not organized under the law or changes are made, the Florida street address of the rwill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab	registe bility of the li	rec con mi	l office and apany, it is sed liability	d the business office of s hereby confirmed that y company or as othery	the regi t the cha	stered nge(s)
/s/ Jill Cilmi				Jill Cilmi, Authorized Person				
11 pro the to	ierel ovisio obli mere tified	ure of a member or authorized representative of a member by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I he is in writing of this change.	erforn for in ereby c	nai Cl coi	ice of my a apter 605 ifirm that i	Printed or typed name of sacity. I further agree to duties, and I am familia, F.S. Or, if this documented limited liability contast. Vice President	- o <i>compl</i> i	with the accept eing filed as been
Sig		e of Registered Agent			3 * * *			