7/21/2021



Division of Corporations Electronic Filing Cover Sheet

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17				
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Help

To: 18506176383 Page: 3 of 3 2021-07-21 15:39:08 CST 19542080845 From: Ranae McGraw

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.

. No	nme of the limited liability company: eMindful LLC					
. (a)	11315 Corporate Blvd. Ste 210, Orlando, FL 32817		(b) 11315 Corporate Blvd Ste 210, Orlando, FL 32817			
. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited fiability company: **ONOTE: MAY BE POST OFFICE BOX**)			
	06/29/2021		M21000008	292		
	Date of filing/registration in Florida	4.		Document number		
(a)	Mary Pigatti					
(4.7	Registered Agent and Registered Office shown on the records	of the Florida	Dept of State	– ਦ:		
				-		
	Registered Office Address (MUST BE FLORIDA STREE	. × s				
	11315 Corporate Blvd. Ste 210	21				
	Orlando	FL 32817				
				~		
(b)	C T Corporation System			P# 0876		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office ad	dress'	2 PH 2: 12		
				: 12		
	NEW Registered Office Address:					
	1200 South Pine Island Road					
	Diameters.	22224		-		
	Plantation	Ft. <u>33324</u>		_		
e cha ent v as/wo	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the membericles. Corganization or the operating agreement of the	of the regis I liability ed is of the lim he limited l	stered office ompany, it is sited liability	e and the business office of the registere is hereby confirmed that the change(s) y company or as otherwise provided in		
Signa	tale of a member or authorized representative of a member			Printed or typed name of signee		
herei roviși re ohl merc stifiec	hy accept the appointment as registered agent and clions 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, din writing of this change.	ete perform ided for in (I hereby co	in this cap ance of my Thapter 60, onfirm thai	acity. I further agree to comply with thi		
. (Candice Pignataro, Assistant Secretary					

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

Signature of Registered Agent