M21000010827

	- :				
(Requ	uestor's Name)				
(Addi	ess)				
(Addr	ess)				
	Ct (7' · (D)	- 40			
(City)	State/Zip/Phon	е #)			
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					
		<u> </u>			





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2021 SEP 23 AH 8: 55

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ALLI AHASSEE TOTAL

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195						
REFERENCE : 010145 8354376						
AUTHORIZATION :						
COST LIMIT : \$ 25.00 Man						
ORDER DATE : September 15, 2021						
ORDER TIME : 5:29 PM						
ORDER NO. : 010145-013						
CUSTOMER NO: 8354376						
CHANGE OF AGENT						
NAME: PALM WAY INVESTMENTS LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY						
XX PLAIN STAMPED COPY						
CONTACT PERSON: Eyliena Baker						
EXAMINER'S INTITALS:						

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: PALM WAY IN	VESTMEN	ITS LLC		
2. (a)		(b)		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		<u></u>	Mailing address o	of limited liability company: BE POST OFFICE BOX)
	14307 JARRETTSVILLE PIKE, STE. A		P.O. BOX	X 88	
	PHOENIX, MD 21131	_	PHOENIX	X, MD 21131	
	08/18/2021		M210000	10827	
3.	Date of filing/registration in Florida	_{4.} -	<u>. </u>	Document nu	mber
5. (a)				
J. (a	Registered Agent and Registered Office shown on the records of ARSCOTT, JOHN C	f the Florida	Dept. of Stat	e:	
	Registered Office Address (MUST BE FLORIDA STREET) 582 PALM WAY	ADDRESS)		_	2021 : SECT
	GULFSTREAM . FI	33483		_	SEP 23
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	d Office add	ress:	-	M 8:55
	NEW Registered Office Address:			_	
	1201 Hays Street			_	
	Tallahassee, FI	32301		_	
chang agent was/w the art	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited limited it are authorized by an affirmative vote of the members of organization or the operating agreement of the limited if a member or authorized representative of a member or by accept the appointment as registered agent and agreement of the limited in t	e registered ability con of the limi i limited lia Jill C	I office an appany, it is ted liability con illumi, Authon this cape	d the business is hereby confir y company or a pany. Printed or typed activ. I further	office of the registered med that the change(s) as otherwise provided in name of signce
provis the ob to mer notifie	tons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address. I d in writing of this change.	performa d för in Cl hereby con	ice of my o iapter 605 ifirm that i	duties, and I an i, F.S. Or, if th the limited liab st. Vice Presid	n familiar with and accept his document is being filed pility company has been