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Office Use Only



000389286690 SECRETARY OF STALLAR ASSECUTE TO AM 9: 09

2022 JUN 10 PM 3: 22 RECEIVED CORPORATION SERVICE COMPANY

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

ACCOUNT NO. : I2000000195					
REFERENCE : 730333 7404935					
COST LIMIT : \$ 25.00					
COST LIMIT : \$ 25.00					
ORDER DATE : June 7, 2022					
ORDER TIME : 2:24 PM					
ORDER NO. : 730333-020					
CUSTOMER NO: 7404935					
CHANGE OF AGENT					
NAME: DD DANIELS PKWY, LLC					
MAME: OD DANIELS PAWI, LUC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY					
XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland					

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. N	lame of the limited liability company: DD DANIELS	PKWY, L	LC	
2. (a)				
` '	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	403 CORPORATE CENTER DRIVE STE 201		403 CORPORATE CENTER DRIVE STE 201 STOCKBRIDGE, GA 30281	
	STOCKBRIDGE, GA 30281			
	12/09/2021		M210000	016867
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 shown on the shown of the shown on the shown of the shown on the shown of the shown on the shown on the shown on the shown on the sho	of the Florid	la Dept. of St	ite:
	CT Corporation System			
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u>(S)</u>	_
	200 South Pine Island Road			20 SE TAL
	Plantation 1	33324		FILED 2022 JUN 10 AM 9: A SECRETARY OF STATE ALLAHASSEL FILE
				N N N N N N N N N N N N N N N N N N N
(b)	Enter name of NEW Registered Agent and/or NEW Register	1.000	11	- CF
	niner name of NEW Registered Agent and/or NEW Register	ed Office a	uuress;	33
	Corporation Service Company			·
	NEW Registered Office Address:			- 0
	1201 Hays Street			_
	Tallahassee	32301		
chang agent was/w the arr	limited liability company is not organized under the le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the ASA: JILL CILMI	ne register liability co s of the lin ne limited	ed office as ompany, it nited liabili liability co	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in
provis the ob to mei	eby accept the appointment as registered agent and assions of all statutes relative to the proper and completed ligations of my position as registered agent as provided by reflect a change in the registered office address, and in writing of this change.	gree to ac le perform led for in l I hereby c	t in this cap vance of my Chapter 60 onfirm thai	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Signat	ure of Registered Agent	GRACE	E E. KIRBY	7. ASST. VICE PRESIDENT