

M21 000017241

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

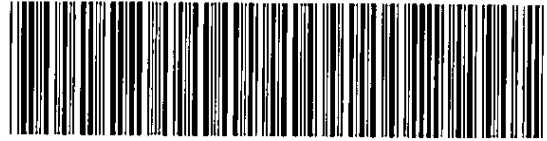
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

2022 NOV -7 PM 3:22

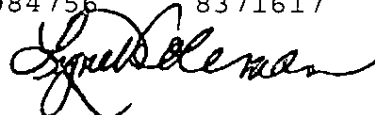
CLERK OF COURT
TALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I200000000195

REFERENCE : 084756 8371617

AUTHORIZATION :



COST LIMIT : \$ 25.00

ORDER DATE : October 28, 2022

ORDER TIME : 1:59 PM

ORDER NO. : 084756-079

CUSTOMER NO: 8371617

CHANGE OF AGENT

NAME: SVP PRIDGE LLC

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. Name of the limited liability company: <u>SVP PRIDGE LLC</u>	
2. (a) <u>2204 LAKESHORE DR, STE 325</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i>	(b) <u>2204 LAKESHORE DR, STE 325</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i>
<u>BIRMINGHAM, AL 35209</u>	<u>BIRMINGHAM, AL 35209</u>
<u>12/17/2021</u>	<u>M21000017241</u>
3. Date of filing/registration in Florida	4. Document number
5. (a) <u>INCORP SERVICES, INC.</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State: <u>17888 67TH COURT NORTH</u> Registered Office Address <i>(MUST BE FLORIDA STREET ADDRESS)</i> <u>LOXAHATCHEE, FL 33470</u>	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>Corporation Service Company</u> <u>NEW Registered Office Address:</u> <u>1201 Hays Street</u> <u>Tallahassee, FL 32301</u>	

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TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

<u>/s/ Jill Cilmi</u> Signature of a member or authorized representative of a member	<u>Jill Cilmi, Authorized Representative</u> Printed or typed name of signee
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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Grace E. Kirby
Signature of Registered Agent
Grace E. Kirby, Asst. Vice President