## PP114000006199

(Requestor's	s Name)			
(Address)				
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(City/State/Z	Zip/Phone #)			
PICK-UP V	VAIT MAIL			
(Business Entity Name)				
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c/ 8/10/2022

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 873103 7285802
AUTHORIZATION: Spelledenan
COST LIMIT : \$ 25.00
ORDER DATE : August 9, 2022
ORDER TIME : 2:21 PM
ORDER NO. : 873103-015
CUSTOMER NO: 7285802
~ • • • • • • • • • • • • • • • • • • •
CHANGE OF AGENT
NAME: SOUTHWIND-POLK, LLC
MANA. SOUTHWIND FORK, ERC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CONTACT PERSON: Alexxis Weiland
EXAMINER'S INTITALS.

## **COVER LETTER**

Division of Corporations	
Southwind-Polk, LLC SUBJECT:	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Ben Engel	
Name of Person	<del></del>
ECI Group	
Firm/Company	
2100 Powers Ferry Rd, Suite 200	
Address	
Atlanta, GA 30339	
City/State and Zip Code	<del></del>
bengel@ecigroups.com	
E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter, pleas	se call:
Ben Engel	678 358-3222
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount	นnt:
■ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

## 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.

2100 Powers Ferry Rd, Suite 200  Principal office address of limited liability company: (Nate. MUST BE STREET ADDRESS)  Allanta, GA 30339  Allanta	I. Na	me of the limited liability company: Southwind-Polk,	LLC			
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Atlanta, GA 30339  Atlanta, GA 3039  Atlanta, GA 30339  Atlanta, GA 30339  Atlanta, GA 30339  Atl	2. (a)	2100 Powers Ferry Rd, Suite 200		(h)	2100 Pov	wers Ferry Rd, Suite 200
Date of filing/registration in Florida 4. Document number  Registered Agent Solutions, Inc.  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  155 Office Plaza Dr., Suite A  Tallahassee , FL  Sagon  Corporation Service Company  NEW Registered Office Address:  1201 Hays Street  Tallahassee , FL  Tallahasee , FL  Tallahasee	(/	•	<del></del>	(0)		· · · · · · · · · · · · · · · · · · ·
Date of filing/registration in Florida 4. Document number  Registered Agent Solutions, Inc.  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  155 Office Plaza Dr., Suite A  Tallahassee FL 32301  (b)  Enter name of NEW Registered Agent and/or NEW Registered (Mice address)  Corporation Service Company  NEW Registered Office Address:  1201 Hays Street  Tallahassee FL 32301  Tallaha		Atlanta, GA 30339	<del></del>		Atlanta, G	GA 30339
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  155 Office Plaza Dr., Suite A  Tallahassee			_	1	M220000	004199
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  155 Office Plaza Dr., Suite A  Tallahassee  FL  32301  (b)  Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company  NEW Registered Office Address:  1201 Hays Street  Tallahassee  FL  32301  The limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the large or changes are made, the Florida street address of the registered office and the business office of the registered gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) ass/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of Lorganization or the operating agreement of the limited liability company.  Ben Engel  Nignature of street address of a member  Printed or typed name of signee  Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rowisions of all statutes relative to the proper and complete performance of my duties, and I am jumiliar with and accept the endigations of my position as registered agent as provided for in Chapter 605, F.S. Or, this document is being filed in writing of this change.  Which assistant your product	3.	Date of filing/registration in Florida	4.	_	•	Document number
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  155 Office Plaza Dr., Suite A  Tallahassee FL 32301  (b)  Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company  NEW Registered Office Address:  1201 Hays Street  Tallahassee FL 32301  The limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the hange or changes are made, the Florida street address of the registered office and the business office of the registered gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) as were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in a carticles of organization or the operating agreement of the limited liability company.  Ben Engel  Signature of amount of the proper and complete performance of my duties, and I am jamiliar with and accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rowisions of all statutes relative to the proper and complete performance of my duties, and I am jamiliar with and accept the registered agent as provided for in Chapter 605, F.S. Or, this document is being filed in writing of this change.  Which assistant to address. Thereby confirm that the limited liability company has been of the proper and campeted performance of my duties, and I am jamiliar with and accept the configuration of the chapter of the proper and complete performance of my duties, and I am jamiliar with and accept the configuration of the proper and complete performance of my duties, and I am jamiliar with and accept the configuration of the proper and complete performance of my duties, and I am jamiliar with and accept the configuration of the proper and complete performance of my duties, and I am jamiliar with and accept the config	(a)	Registered Agent Solutions, Inc.				
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