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2022 NOV -7 PM 3: 23

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

	ACCOUNT	? NO. ;	I2000000	0195	
	REFER	RENCE :	084756	8371617	
	AUTHORIZA	TION :	~ ^		
	COST I	AIMIT	MA SIL	man.	
ORDER DATE	: October 28,	2022			
ORDER TIME	: 1:58 PM				
ORDER NO.	: 084756-047				
CUSTOMER NO	O: 8371617				
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	<u>CHANGE</u>	OF AGEN	Ţ		
IMAN	E: SVP DELR	AY LLC			
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	AIN STAMPED COP	Y			
CONTACT PER	RSON: 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:	Y LLC					
2. (a)	2204 LAVESHORE DD CHITE 225		(b) 2204 LAKESHORE DR. SUITE 325				·
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	BIRMINGHAM, AL 35209		BIRMING	GHAM, AL 35209			
	05/13/2022		M2200000	7598			
3.	Date of filing/registration in Florida	<u> </u>		Document numbe	r		_
5. (a	INCORP SERVICES, INC.						
•	Registered Agent and Registered Office shown on the records	of the Florid	a Dept. of Sta	 Ie:			
	17888 67TH COURT NORTH				ζī	20	
	Registered Office Address (MUST BE FLORIDA STREE	TADDRES	<u>S)</u>	_	TALL	2022 NOV - 7	4
	LOXAHATCHEE	33470		_	AHASS		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> Corporation Service Company	ed Office ac	ldress:	_	en in a series of the series o	AM 10: 19	O
	NEW Registered Office Address:			_			
	1201 Hays Street			_			
	Tallahassee F	FL_32301		_			
agent was/was/was/was/was/was/was/was/was/was/	imited liability company is not organized under the less of changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited here authorized by an affirmative vote of the members icles of organization or the operating agreement of the fill Cilmi	ne registere liability co s of the lim se limited l	ed office and impany, it is lited liability iability com	d the business offic s hereby confirmed y company or as of	e of the that the herwise p	register change	ed (s)
the obliner	by accept the appointment as registered agent and agens of all statutes relative to the proper and completigations of my position as registered agent as providely reflect a change in the registered office address. It is writing of this change.	gree to act e performe led for in C I hereby co	in this capa ince of my a hapter 605, infirm that i	acitv. I further agre htties, and I am fan , F.S. Or, if this do the limited liability	re to con niliar wil cument i company	iply with and is being has be	th the accept i filed een

Division of Corporations P.O. Box 6327 Tallahassee, FI 32314

Grace E. Kirby, Asst. Vice President