M23000000412

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
(Okyotato/2pp/ Horic #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer;	l
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CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000	0195					
	REFERENCE	:	124395	8423450					
	AUTHORIZATION	l :	Freels	Home.	ノ				
	COST LIMIT	· :	\$ 25.00,						
ORDER DATE :	November 9, 202	:3							
ORDER TIME :	9:31 AM								
ORDER NO. :	124395-149								
CUSTOMER NO:	8423450								
CHANGE OF AGENT									
NAME :	SOUTHERN LIT	'НО Х	VI LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY									
XX PLAIN	STAMPED COPY								
GOVERNOE DED CO.	n								
CONTACT PERSO	N: Alexxis Weil	.and-	sorenson						
	E	IMAX	NER'S INI	TIALS:					

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.	Na	me of the limited liability company: SOUTHERN LI	THO XVI	L	LC		
2. (ล)	<u> </u>	(l	h)		711-t-	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		υ,	7	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		9010 STRADA STELL CT STE 103			9010 STR	RADA STELL CT STE 103	
		NAPLES, FL 34109			NAPLES,	FL 34109	
		01/10/2023		1	M23000000	00412	
3.		Date of filing/registration in Florida	4.			Document number	
5. ((a)						
٥, ١	(11)	Registered Agent and Registered Office shown on the records of	the Florida	a L	Dept. of State:	- <u>!:</u>	
		CAPITOL CORPORATE SERVICES, INC.			•		
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u>S)</u>		-	
		515 EAST PARK AVENUE 2ND FL					
		TALLAHASSEE . FI	32301			2023 NOV	
						A TI	
(b) .	Enter name of NEW Registered Agent and/or NEW Registered				ASSI	
		Enter name of NEW Registered Agent and/or NEW Registered	SS ω I				
		Corporation Service Company				HOV 13 AM 10: 51 AHASSEE, FLORIDA	
		NEW Registered Office Address:				8.051	
		1201 Hays Street	—————————————————————————————————————				
		Tallahassee F1	32301				
chan agen was/	ige it w wei	mited liability company is not organized under the law or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited ling re authorized by an affirmative vote of the members of these of organization or the operating agreement of the	registere ability co of the lim	ed m ite	office and pany, it is ad liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
	/	s/ Daniel Conley	Dan	nie	l Conley, A	Authorized Person	
Signature of a member or authorized representative of a member					Printed or typed name of signee		
prov the a to m	isio blij er e :	y accept the appointment as registered agent and agr ins of all statutes relative to the proper and complete gations of my position as registered agent as provide ly reflect a change in the registered office address, I l in writing of this change.	ree to act performa d for in C hereby co	ir an Thom	i this capac ce of my di apter 605, firm that th	city. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed he limited liability company has been	
ann	،دبر پ	Drace C-Kuble	GRA	C	E E KIRB'	Y, ASST. VICE PRESIDENT	
Sign	atur	e of Registered Agent					