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Division of Corporations



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LLC REGISTERED AGENT CHANGE WINDOW CITY, LLC

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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	ame of the limited liability company: WINDOW CITY.	LLC		
2. (n)	813 Ridge Lake Blvd.	(b) 813 RIDGE LAKE BLVD.		
2. (,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(-)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Memphis, TN 38120	<u> </u>	MEMPHIS, TN 38120-9403	
	11/27/2023		23000014971	
 (a) 	Date of filing/registration in Florida PARACORP INCORPORATED	4.	Document number	
J. (14)	Registered Agent and Registered Office shown on the records of the 155 OFFICE PLAZA DRIVE	the Florida De	· · · · · · · · · · · · · · · · · · ·	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) EST FLOOR		F1L 2025 JAN 31 SEC 46 14-40 ALL ABAS 3	
(b)	TALLAHASSEE , FL	32301		
	C T Corporation System			
	Unter name of NEW Registered Agent and/or NEW Registered Office address:			
	NEW Registered Office Address:			
	1200 South Pinc Island Road			
	Plantation FL	33324		
the cha agent v was/wa	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of clessofter organization or the operating agreement of the James a. Howard	vs of the Sta the register ability comp of the limited limited liab	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in bility company.	
Cimma	ture in the member of authorized representative of a member	JAMES	S A. HOWARD, EXECUTIVE CHAIR	
I here provisi the obl to mer	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provided elv reflect a change in the registered office address, 11 d in writing of this change. CT Corporation System	performanc d for in Cha liereby confi	Printed or typed name of signee this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept upter 605, F.S. Or, if this document is being filed firm that the limited liability company has been ASSISTANT SECRETARY	
Signatu	re of Registered Agent			