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REGISTERED AGENT CHANGE POOLE MANAGEMENT COMPANY

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
	ange is submitted for a corporation organized under the laws of the State of Fl or ida
	er to change its registered office or registered agent, or both, in the State of Florida.
1. The name of	the corporation: Poole Management Company
2. The principa	office address: 1000 Riverside Avenue, Suite 400, Jacksonville, FL 32204
p	
-	
_	address (if different):
4. Date of incom	poration/qualification: 06/16/1999 Document number: P99 000 \$4838
	d street address of the current registered agent and registered office on file with the
	Brant, Reiter, McCormick, & Johnson PA
	125 W-s D-s Orac Code 400
,*	135 West Bay Street, Suite 400
	Jacksonville, FL 32202
,	
6. The name ar (if changed):	ed street address of the new registered agent (if changed) and /or registered office
	Smith Hulsey & Busey, Professional Association
	One Independent Drive, Suite 3300
	P.O. Box NOT acceptable
	Jacksonville, FL 32202
The street add as changed will	ress of its registered office and the street address of the business office of its registered agent, I be identical.
Such change wanthorized by	as authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change.
N	Lockwood Holmes
Signa	ure of an oblicer or director Printed or typed name and little
I hereby accept I further agree of my duties, a document is be corporation has	of the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance and I amiliar with and accept the obligation of my position as registered agent. Or, if this eling filed merely to reflect a change in the registered office address, I hereby confirm that the us been notified in writing of this change.
4	November 7, 2022
	endure of Registered Agent Dote
If signing on h	ehalf of an entity:
Stephen D.	Moore, Ir.
	Typed or Printed Name
	* * * FILING FEE: \$35.00 * * *
, , , , , , , , , , , , , , , , , , ,	Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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