L0300002654

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(Address)					
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2022 NOV 15 PM 3: 43



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

AUTHORIZATION

REFERENCE :

COST LIMIT : \$ 25.00

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ORDER DATE: November 7, 2022

ORDER TIME : 1:21 PM

ORDER NO. : 116891-119

CUSTOMER NO: 7143029

CHANGE OF AGENT

NAME: DUKE-LAKEWOOD I, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker -- EXT#

EXAMINER:

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.

Name of the limited liability con	DUKE-LAKE	EWOOD I, LLC			
(a)1800 Wazoo Street, Suite 500		(b) _			
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
Denver, CO 80202					
07/21/2003		LO	3000026554		
Date of filing/registr	ation in Florida	4.	Document numb	er	
(a) C T Corporation System					
Registered Agent and Registered Of	Tice shown on the records	s of the Florida De	pt. of State:		
1200 South Pine Island Roa	d				
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				2022 N Secri	
Plantation		FL33324		ZOZZ NOV 15 SECRETARY ALLAHASSER	
	-			T R 17	
(b)				٠ ن	
Enter name of NEW Registered Ag	ent and/or NEW Registe	red Office addres	<u>.s</u> :	N	
Corporation Service Compar	าง			0 0	
NEW Registered Office Address:				* ;	
1201 Hays Street					
Tallahassee		FL 32301			
ne limited liability company is not nge or changes are made, the Flor nt will be identical. Or, in the cas /were authorized by an affirmativ articles of organization or the ope	organized under the ida street address of the of a Florida limited to vote of the member	laws of the Sta the registered of Hiability comp rs of the limited he limited liabi	ffice and the business off any, it is hereby confirme I liability company or as o lity company.	nce of the registered that the change(s) otherwise provided in	
Michael T. Blair		Michae	T. Blair, Authorized Pers		
ignature of a member or authorized repres		•	Printed or typed nat		
ereby accept the appointment as r visions of all statutes relative to the obligations of my position as regi- nerely reflect a change in the regi-	egistered agent and a ne proper and comple stered agent as provi fared office address,	ded for in Chaj I hereby confi	e of my dunes, and 1 am fo oter 605, F.S. Or, if this o rm that the limited liabili	gree to comply with the amiliar with and accept document is being filed by company has been	
ified in writing of this change.	/	Corporation	Service Company		
nature of Registered Agent		Ami M. Cas	per, Asst. Vice Presider	nt	