

11/8/2019

Division of Corporations

MO700003325

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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LLC REGISTERED AGENT CHANGE  
OPROCK SARASOTA FEE, LLC

Certificate of Status	0
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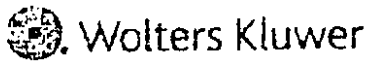
# FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176383
FROM	Kimberly Laughrey
DATE	2019-11-08 07:38:59 CST
RE	12359625 - OPROCK SARASOTA FEE, LLC

## COVER MESSAGE

Robert Sholl  
 Fulfillment Associate  
 Global Fulfillment Operations  
 CT Corporation

Team 614-280-3338  
[GlobalFulfillmentTeam@wolterskluwer.com](mailto:GlobalFulfillmentTeam@wolterskluwer.com)



1200 Orange Street, Wilmington, DE 19801  
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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. Name of the limited liability company: OpKnock Sarasota Fee, LLC

2. (a) _____	(b) _____
Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i>	Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i>
<u>50 California Street, Suite 3000</u>	<u>50 California Street, Suite 3000</u>
<u>San Francisco, CA 94111</u>	<u>San Francisco, CA 94111</u>

3. <u>06/04/2017</u>	4. <u>M07000003325</u>
Date of filing/registration in Florida	Document number

5. (a) COGENCY GLOBAL INC.  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State.

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
115 NORTH CALHOUN ST., SUITE 4  
TALLAHASSEE, FL, 32301

(b) C/T Corporation System  
 Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:  
 \_\_\_\_\_  
**NEW** Registered Office Address:  
1200 South Pine Island Road  
Plantation, FL, 33324

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

<u>Natalie Pickens</u>	Natalie Pickens, Authorized Person
Signature of a member or authorized representative of a member	Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By James M. Halpin Assistant Secretary  
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00