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A. DUTLER MAR 2 4 2023 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 595920 8182938

AUTHORIZATION : 1

COST LIMIT : \$25.00

ORDER DATE: March 17, 2023

ORDER TIME : 1:45 PM

ORDER NO. : 595920-075

CUSTOMER NO: 8182938

## CHANGE OF AGENT

NAME: WEST JUPITER RV RESORT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

## 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.

i.	Na	me of the limited liability company:WEST JUPITE	R RV I	RES	ORT, LLC			
2. (		233 S. Wacker Drive	-	(b)	233 S. W	acker Drive		
(	,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	<del></del>	(0)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BON)		
		Suite 4700			Suite 470	0		
		Chicago, IL 60606			Chicago,	IL 60606		
		02/03/2016		١	И1600000	0912		
3. 5. (	a)	Date of filing/registration in Florida NRAI SERVICES, INC.	4.	-		Document number		
Σ. (	(4)	Registered Agent and Registered Office shown on the records of 1200 SOUTH PINE ISLAND ROAD	Tthe Flo	rida l	Dept. of State	- e: -		
		Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)				
		PLANTATION FI	3332	4		2023 HAR		
(i	(b)	Enter name of NEW Registered Agent and/or NEW Registered			ress:	- 23		
		Corporation Service Company				AHII: 0		
		NEW Registered Office Address:  1201 Hays Street				· , S		
		Tallahassee FI	3230	1				
chan agen was/	ge E W We	mited liability company is not organized under the law or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited live the authorized by an affirmative vote of the members of the of organization or the operating agreement of the	regist ability of the l	ered con limit	office and pany, it is ed liability	I the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
		/S/ Jill Cilmi	J	ill Ci	lmi, Autho	rized Representative		
Signature of a member or authorized representative of a member						Printed or typed name of signee		
prov the o to me	isio bli 2re	ny accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I i in writing of this change	ree to e perfor d for it hereby	nct in man n Ch con	n this capa ice of my a apter 605, firm that t	wity. 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		

Grace E. Kirby, Asst. Vice President
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

Mco

Signature of Registered Agent