

M16000008304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

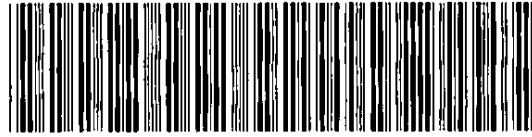
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



000300370890

FILED
2011 JUN 27 AM 8:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
17 JUN 27 AM 11:19

K. SALY
JUN 28 2011



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Date: June 26, 2017

Account#: I20000000088

Name: Marisa Kugelmann

Reference #: G033892

Entity Name: 5885 CORNELIUS PASS REALTY CO. LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other _____

Authorized Amount: \$25,000

Signature: *Marisa Kugelmann*

• CORPORATE HQ
COGENCYGLOBAL LLC
115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
+1.212.947.7200

• EUROPEAN HQ
COGENCYGLOBAL LIMITED
115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
+44 (0)20 3785.1090

• ASIA PACIFIC HQ
COGENCYGLOBAL (HK) LIMITED
115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
+852.3975.1803



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

COVER LETTER

TO: Registration Section
Division of Corporations

5885 Cornelius Pass Realty Co. LLC

SUBJECT: _____
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth Zydel

Name of Person

Thompson Coburn LLP

Firm/Company

55 East Monroe Street, 37th Floor

Address

Chicago, IL 60603

City/State and Zip Code

ezydel@thompsoncoburn.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Name of Person at (_____) _____
Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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: 5885 Cornelius Pass Realty Co. LLC

2. (a) 1 N. Franklin, Ste. 2400, Chicago, IL 60606 (b) 1 N. Franklin, Ste. 2400, Chicago, IL 6060
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

3. 10/18/2016 Date of filing/registration in Florida 4. # M16000008304 Document number

5. (a) M16000008304
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Corporation Service Company
 Registered Office Address **(MUST BE FLORIDA STREET ADDRESS)**
1201 Hays Street
Tallahassee, FL 32301

FILED
 2017 JUN 27 AM 8:36
 STATE DEPT. OF STATE
 TALLAHASSEE, FL 32301

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:
Cogency Global Inc.
NEW Registered Office Address:
115 North Calhoun St., Ste. 4
Tallahassee, FL 32301

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.

Rebecca Spooner
 Signature of a member or authorized representative of a member Printed or typed name of signee

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.
Assistant Secretary
 Signature of Registered Agent