(Re	equestor's Name)					
(Ad	ddress)					
(Ad						
(Cit	ty/State/Zip/Phone	e #)				
PICK-UP	MAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
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EB 1 1 (0)? I ALBRITTON CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 459180 7644364

AUTHORIZATION :

COST LIMIT : \$ 25.00 hid

ORDER DATE: February 4, 2022

ORDER TIME : 9:23 AM

ORDER NO. : 459180-091

CUSTOMER NO: 7644364

CHANGE OF AGENT

NAME: 517 FALKENBURG PARTNERS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS:

. 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. N	lame of the limited liability company: 517 FALKENE	BURG PA	RTNE	RS, LLC		
2. (a)	·	(ъ)			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 414 S 16TH STREET STE 100 PHILADELPHIA, PA 19146			
	414 S 16TH STREET STE 100					
	PHILADELPHIA, PA 19146	_ 				
	08/26/2020		M200	000007429		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a))					
•	Registered Agent and Registered Office shown on the records of SHUTTS & BOWEN LLP	of the Floric	la Dept.	of State:		
	Registered Office Address (MUST BE FLORIDA STREET	T ADDRES	<u>(S)</u>			
	4301 W BOY SCOUT BLVD STE 300		<u>မာ</u> 	202		
	TAMPA	33607		TALL TALL	2022 FEB 10	77
(b)	·			AHASSET	10	m
	Enter name of NEW Registered Agent and/or NEW Registered	ed Office a	<u>ddress</u> :	SEE.	7	6
	Corporation Service Company			FL	9: 37	
	NEW Registered Office Address:				1	
	1201 Hays Street	<u></u>				
	Tallahassee, F	32301				
chang agent was/w	limited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited laterer authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	ne register liability co of the line e limited	red offi ompan nited li liabilit	ice and the business office of the iv. it is hereby confirmed that the iability company or as otherwis iy company.	e regist e chan	ered ge(s)
Sion	ature of a member or authorized representative of a member	701	Cilmi, i	Authorized Person Printed or typed name of sign		
I here provis the ob to mer	thy accept the appointment as registered agent and as ions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.	e perform led for in l	iance o Chaptè	is capacity. I further agree to co of my duties, and I am familiar v er 605, F.S. Or, if this documen	omply v vith and it is bei	d accept ny filed
<u></u>	ure of Registered Agent	Gra	ace_E. 1	Kirby, Asst Vice President		
उपद्राक्षा	me or registered regent - \					