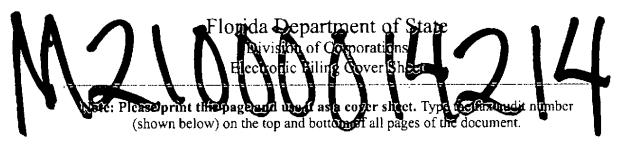
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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.

 Na (a) 	fame of the limited liability company: Lincoln Gubor II 601 Office Center Drive Suite 300			601 Office Center Drive Suite 300		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_ (b)	Mailing address of limited liability company: (Note: MAY BL POST OFFICE BON)		
	Fort Washington, Pennsylvania 19034			Fort Washington, Pennsylvania 19034	-	
	10/26/2021			M21000014214	<u>-</u>	
3.	Date of filing/registration in Florida	4		Document number		
5. (a)	REGISTERED AGENT SOLUTIONS, INC.					
(a)	Registered Agent and Registered Office shown on the records of	fthe Fl	orida I	n Dept. of State:		
	155 OFFICE PLAZA DR., STE A					
	Registered Office Address MUST BE FLORIDA STREET	ADDI	ESS)	51		
				7. <u>1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1</u>	202	
	TALLAHASSEE , FI	32	301	Mress:	2022 NOV	~ 1
4.)	Business Filings Incorporated			·	ယ်	1
(b)	Euler using of NEW Registered Agent and/or NEW Registerer	ı ome	e add	Idress:	Ē	17
				• •	<u>Š</u>	
	1200 South Pine Island Road				دّ	
	NEW Registered Office Address:			•	7	
	Plantation	L 33	324			
the cha agent v was/wa the arti	imited liability company is not organized under the la inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the iabili of the fimi	regist ly cor limi ted lis Edw	istered office and the business office of the registere ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in liability company. It is built for the first f		nber of
-	time of a member or authorized representative of a member			Printed or typed name of signee		
nonjie	hy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree te e p e rf ed for here	eact in Ci oimia in Ci by coi	t in this capacity. I firsther agree to comply with the cance of my duties, and I am familiar with and accap Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been	i of d	
	が、一巻。 ne of Registered Agent					
	ne of Registered Agent is Das, AVP, Business Filings Incorporated					
Cill	Division of Corporations P.O.					