## L18000 248 902

(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:						

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O SIMMONS



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927**-**9800 302-636**-**5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Logan Hall logan.hall@cscglobal.com

Date: January 20, 2020

Order#: 146341/005

Re: 5049 BELL SHOALS PROPCO, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Logan Hall c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## 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.

l.	Na	me of the limited liability company: 5049 BELL SHC	ALS PR	OPCO,LLC	·		
2	(2)	2668 NORTH PARK DRIVE	(b)	2668 N	ORTH PARK DRIVE		
<u> </u>	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
		LAFAYETTE, CO 80026	_	LAFAYE	TTE, CO 80026		
		10/23/2018	_	L1800024	48902		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	HENNING, CHRISTIAN F, JR					
J.	(44)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	· 2:		
		3033 RIVIERA DRIVE SUITE #102			Ø	2	
		Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)		TALLA	2020 JAN	a da san Nila Nila Nila Mara Sa
		NAPLES . FL	34103		1 タか 3	22 P	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:		PM 5: 55	
		1201 Hays Street					
		NEW Registered Office Address:					
		Tallahassee	32301				
th ag w	e cha jent v as/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law /s/ Dean Kiklis	vs of the the regis ability co f the limi limited li	tered office mpany, it is ited liability ability com	e and the business office of s hereby confirmed that the y company or as otherwise apany.	of the reg ie chang	gistered e(s)
_	Siann	ture of a member or authorized representative of a member	Dear	ı Kiklis, Aut	thorized Person  Printed or typed name of signs		
I proth to	herei ovisi e obl meri tified	by accept the appointment as registered agent and aground on sof all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have a change in the registered office address. I have a change of this change.	performa I for in C iereby co	ince of my a hapter 605 infirm that i	acity. I further agree to c	omply w with and it is beir iny has	rith the l accept ng filed heen

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

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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.	Na	me of the limited liability company: 5049 BELL SHO	ALS PRO	ROPCO,LLC
2	(a)	2668 NORTH PARK DRIVE	(b)	2668 NORTH PARK DRIVE
	(11)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		LAFAYETTE, CO 80026		LAFAYETTE, CO 80026
		10/23/2018		L18000248902
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	HENNING, CHRISTIAN F, JR		
	(-)	Registered Agent and Registered Office shown on the records of th	e Florida I	i Dept. of State:
		3033 RIVIERA DRIVE SUITE #102		
		Registered Office Address (MUST BE FLORIDA STREET AD	DDRESS)	2020 JAN 22 SECRE LA
		NAPLES , FL	34103	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered C  1201 Hays Street  NEW Registered Office Address:	Office addi	
			32301	<del></del>
th ag w	e cha ent v as/we	mited liability company is not organized under the law- nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lial- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regist bility con the limit	stered office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
		/s/ Dean Kiklis	Dean	an Kiklis, Authorized Person
		ure of a member or authorized representative of a member		Printed or typed name of signee
pr th to no	ovisi e obl merc tifico	ov accept the appointment as registered agent and agreens of all statutes relative to the proper and complete programs of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.  The coff Registered Agent Corporation Service Company	performa for in Ci ereby coi	ance of my duties, and I am familiar with and accept Chapter 605, F.S. Or, if this document is being filed