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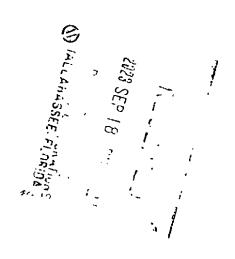
(Requestor's Name)					
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2023 SEP 18 AM 8: 31 Secretary of State Editoria



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.

Name of the limited liability company:		NAGICO, LLC		
2.	(a)	1955 SHERMER ROAD	(b) _	55 W MONROE STREET
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		SUITE 300		SUITE 2300
		NORTHBROOK, IL 60062		CHICAGO, IL 60603
		4/25/2008		L08000042562
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	CORPORATION SERVICE COMPA	ANY	
	• ,	Registered Agent and Registered Office shown on the records of	the Florida De	ept. of State:
		1201 HAYS STREET		
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESSI SE CRI	
		TALLAHASSEE , FI	32301-	
	(b) Cogency Global Inc.			A A D
		Enter name of NEW Registered Agent and/or NEW Registered	d Office addre	
		115 North Calhoun Street, Suite	4	
		NEW Registered Office Address:		
		Tallahassee , FI	323	01
th ag w	e cha gent v as/wo	imited liability company is not organized under the la ange 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	ws of the St f the register ability com of the limite	nate of Florida, it is hereby confirmed that after red office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in
_		/s/Dru Goodman		Dru D. Goodman
[pr	herei ovisi e obl	ture of a member or authorized representative of a member by accept the appointment as registered agent and ag ions 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 to act in performant d for in Chu hereby conj	Printed or typed name of signee I this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Si	ignatu	trann Carcalde, Asst. Set	7	

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