SIGNATURE: BRIAN HOWEL

Electronic Signature of Signing Authorized Person(s) Detail

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000143601

Entity Name: THOMASSON PHX, LLC

Current Principal Place of Business:

13180 LIVINGSTON ROAD SUITE 204 NAPLES, FL 34109

Current Mailing Address:

13180 LIVINGSTON ROAD SUITE 204 NAPLES, FL 34109

FEI Number: 47-4877959

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

JOHNS, RANDY 13180 LIVINGSTON ROAD SUITE 204 NAPLES, FL 34109 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Authorized Person(s) Detail : Title AMBR Title AMBR HOWELL, BRIAN Name Name JOHNS, RANDY 13180 LIVINGSTON ROAD, SUITE 204 Address 13180 LIVINGSTON ROAD, SUITE 204 Address NAPLES FL 34109 City-State-Zip: NAPLES FL 34109 City-State-Zip:

FILED Feb 26, 2018 Secretary of State CC1238869779

Date

Certificate of Status Desired: No

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

LL	MEMBER	02/26/2018
re of Signing Authorized Person(s) Detail		Date