

BOB 000 000 187

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

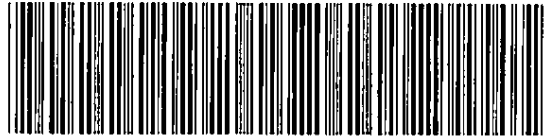
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24 FEB 29 AM 11:20
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

RECEIVED
2024 FEB 29 AM 11:20
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 330889 8433085

AUTHORIZATION :

COST LIMIT : \$ 35.0

ORDER DATE : February 23, 2024

ORDER TIME : 10:12 AM

ORDER NO. : 330889-320

CUSTOMER NO: 8433085

CHANGE OF AGENT

NAME: UDR OF TENNESSEE, L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Shauna Godbolt

EXAMINER'S INITIALS: _____

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. UDR OF TENNESSEE, L.P.
Name of Limited Partnership or Limited Liability Limited Partnership

2. 08/26/2008 3. B08000000187
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System
Name
1200 South Pine Island Road
Address
Plantation, FL 33324
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box not acceptable)
Tallahassee FL 32301
City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

/s/ David G. Thatcher David G. Thatcher, Senior Vice President on
Signature of General Partner behalf of UDR, Inc., General Partner

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with an accept the obligations of my position as registered agent.

Ami M. Casper Corporation Service Company
Signature of Registered Agent Ami M. Casper, Asst. Vice President

Filing Fee: \$35.00
Certified Copy (optional): \$52.50