(Requestor's Name)							
(Address)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
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JUN 2 9 2027 S. PRATHER CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

		ACCOUNT NO). :	12000000	00195
		REFERENC	CE :	764566	8379714
		AUTHORIZATIO	: ИС	Locals	
		COST LIM	[Т :	\$ (35.00	Kenan
ORDER	DATE :	June 22, 2022	· -	·	· · · · · · · · · · · · · · · · · · ·
ORDER	TIME :	1:38 PM			
ORDER	NO. :	764566-052			
CUSTO	MER NO:	8379714			
		CHANGE OF	F AGEN	<u>IT</u>	
	NAME:	WESTDALE AN	IGEL I	ANDING, I	LP
PLEASI	E RETURN	THE FOLLOWING	AS PR	200F OF F	ILING:
XX		FIED COPY STAMPED COPY			
CONTAC	CT PERSOI	N: Eyliena Bak	ter		
			EXAMI	NER'S INI	TTIALS:

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.

I. WESTDALE ANG	EL LANDING, LP					
Nai	me of Limited Partnership or L	imited Liability Limited Partnership	_			
2. 03/19/2015		3. B15000000072				
Date of filing	/registration in Florida	Florida document number				
4. The name of the re Department of State:	gistered agent and the registere	ed office address as shown on the records of the Flor	ida			
	C T CORPORATION SYSTEM					
	Name					
	1200 SOUTH PINE ISLAND	D ROAD	Æέ	20		
	Ad	ldress	<u>-</u>	25		
			82 NOT 28			
	City, State and Zip					
5. The name and Flor	ida street address of the new re	gistered agent and/or office:				
	Corporation Service Compa	any	STA	4H 10: 149		
	N:	ame		- 1		
	Florida street address (P.O. Box not acceptable)					
	Tallahassee	FL_32301				
	City, Sta	ate and Zip				
6.)Such change(s) is/a	re effective when filed by the I	Florida Department of State.				
\times	Out	•				
Signature of General F Jill Cilmi Vice	Partner President on behalf of JGB VE	 ENTURES I, LTD., General Partner				
Thereby accept the ap	pointment as registered agent a	and agree to act in this capacity. I further agree to				
comply with the provis and Lam familiar with	ions of all statutes relative to the appropriate of the appropriate of the state of the appropriate of the a	the proper and complete performance of my duties, we position as registered agent				
Maga	rations.	2 /				
Signature of Registere Grace E. Kirby. Asst.	d Agent Vice President	_				

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50