(Ri	equestor's Name)	
	,	
(Ac	ddress)	<u> </u>
(A)	ddress)	
(At	Jui 655)	
(Cı	ty/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(Ві	usiness Entity Name)	
(De	ocument Number)	<u> </u>
red Copies	Certificates o	of Status
cial Instructions to Fili	ng Officer.	
· · · · · · · · · · · · · · · · · · ·	Office Use Only	

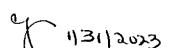


700400727987

2023 JAN 30 AM IO: 56 SECRETAL ASSESSES. FL

To the second se





CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 413429 8256157					
AUTHORIZATION: Knullenan					
COST LIMIT : \$ 35.00					
~					
ORDER DATE : January 26, 2023					
ORDER TIME : 9:11 AM					
ORDER NO. : 413429-015					
CUSTOMER NO: 8256157					
<u>CHANGE OF AGENT</u>					
NAME: LG-OHI HOLDINGS LP					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  CERTIFIED COPY  XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker					

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. LG-OHI HOLDIN	NGS LP			
N	ame of Limited Partnership	or Limited Liability Limited Partner	ship	
211/21/2016		3 B16000000252		
Date of filin	5		ment number	
4. The name of the n Department of State:	egistered agent and the regis	tered office address as shown on the		
	C T CORPORATION SY	YSTEM		
		Name	•	
	1200 SOUTH PINE ISLA	AND ROAD	//	
		Address	2023 SEC TA	
	PLANTATION, FL 33324	4		
	City,	State and Zip	023 JAN 30 SECRENTALLATA	
5. The name and Flor	rida street address of the new	v registered agent and/or office:	<i>5</i> :	
	Corporation Service Con			
		Name	HO: 5	
	1201 Hays Street		JE 56	
	Florida street addres	ss (P.O. Box not acceptable)		
	Tallahassee	FL 32301		
	City,	State and Zip		
5. Such,change(s) is/a	are effective when filed by th	ne Florida Department of State.		
Signature of General P	_	Mordechai Kaplan, Authorized Person on behalf of LG-OHI HOLDINGS GP LLC, General Partner		
and I am familiar with	un accept the obligations of	nt and agree to act in this capacity. o the proper and complete performa f my position as registered agent. Grace E. Kirby, Asst. Vice Pr	ince of my duties.	
Signature of Registered Filing Fee: Certified Copy (or	\$35.00			