10/11/22, 2:50 PM Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

B20000000023

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (954)208-0845
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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APPROVED AND FILED

REGISTERED AGENT CHANGE

CV NLA II LP

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$87.50

Electronic Filing Menu Corporate Filing Menu Help

OCT 12 2022

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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. CV NLA II LP
Name of Limited Partnership or Limited Liability Limited Partnership

2. 01/24/2020
Date of filing/registration in Florida

3. B20000000023
Florida document number

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

CORPORATION SERVICE COMPANY
Name

1201 HAYS STREET
Address

TALLAHASSEE, FL 32301
City, State and Zip

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

C T Corporation System
Name

1200 South Pine Island Road
Florida street address (P.O. Box not acceptable)

Plantation FL 33324
City, State and Zip

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

/s/ David Lobe
Signature of 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 and accept the obligations of my position as registered agent.

David Lobe, authorized signatory of CV NLA II GenPar LLC, its general partner
Signature of Registered Agent

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA