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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL CORPORATE SERVICES, INC.

Account Number : I20160000048 Phone : (800)345-4647 Fax Number : (800)432-3622

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Cmail	Address:				

REGISTERED AGENT CHANGE THIRD LAKE RE PH DEVELOPMENT FUND I, LP

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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

I. THIRD LAKE RE PH DEVELOPMENT Name of Limited Partnership or Limited Lia	FUND I, LP
2. 9/21/2021 Date of filling/registration in Florida	3 B2100000426 Florida document number
4. The name of the registered agent and the registered office a Department of State:	ddress as shown on the records of the Florida
FORSYTHE, ROBERT	
Name	
1600 E 8th Avenue, Suite A132	-A
Address	
TAMPA, FL 33605	
City, State and Zi	p
5. The name and Florida street address of the new registered a	not acceptable)
Capitol Corporate Services, Inc.	
Name	
515 East Park Avenue 2nd Fl	
Florida street address (P.O. Box	not acceptable)
Tallahassee	FL 32301 89 20
City, State and Zi	20
6. Such change(s) is/are effective when filed by the Florida D Signature of Ciental Partner I hereby accept the appointment as registered agent and agree comply with the provisions of all statutes relative to the prope	e to act in this capacity. I further agree to er and complete performance of my duties,
and I am familiar with an accept the obligations of my position	
	decki, Asst. Secretary on behalf
Signature of Registered Agent of Capitol	Corporate Services, Inc.
Filing Fee: \$35.00 Certified Copy (optional): \$52.50	2)))
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