

DISCOUNT

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

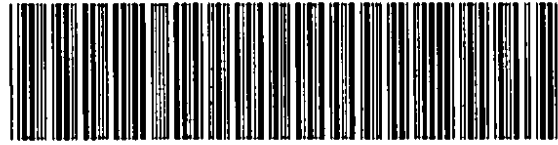
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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07/20/17--01021--004 **35.00

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17 JUL 20 PM 4:40

TALLAHASSEE, FLORIDA

JUL 24 2017

S. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS
From: Marissa Rather-lopez marissa.pitts@cscglobal.com
Date: July 18, 2017
Order#: 720715-050
Re: EXCHANGERIGHT NET LEASED PORTFOLIO 10 DST

Enclosed please find:

XX Change of Registered Agent and Office.
XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.
XX Issue Proof of Filing.
XX Please return evidence to the following:

Attn: Marissa Rather-lopez
c/o Corporation Service Company
251 Little Falls Drive
Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS / Declaration of Trust
609

Pursuant to the provisions of sections ~~607.0502, 617.0502, 607.1508, or 617.1508~~, Florida Statutes, this statement of change is submitted for a ~~corporation~~ ^{Declaration of Trust} organized under the laws of the State of DE in order to change its registered office or registered agent, or both, in the State of Florida.

- ^{Declaration of Trust}
1. The name of the corporation: EXCHANGERIGHT NET LEASED PORTFOLIO 10 DST
2. The principal office address: 251 S Lake Ave #520, Pasadena, CA 91101
3. The mailing address (if different): 251 S Lake Ave #520, CA 91101
4. Date of incorporation/qualification: 08/17/2015 Document number: D1500000029

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Paracorp Incorporated
155 Office Plaza Dr, 1st Floor
Tallahassee FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company
1201 Hays Street
Tallahassee FL 32301
P.O. Box NOT acceptable

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Jill Cirmi ^{Declaration of Trust} Authorized Person
Signature of an officer or director Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

By: Grace E. Kirby ^{Declaration of Trust} Date: 07/18/2017
Signature of Registered Agent

If signing on behalf of an entity:
Grace E. Kirby, Asst. Vice President
Typed or Printed Name

*** FILING FEE: \$35.00 ***