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(Re	questor's Name)			
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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#: 720715-084

Re: EXCHANGERIGHT NET LEASED PORTFOLIO 13 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.

OUCA.XCOA



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

Pursuant to the p statement of chai	provisions of sections 607,9502 , 61 DC (A. A.) 116 nge is submitted for a cor poration	7.0 50 2, 6 07:1 508, or 617-1508, Florida S n 6} Trùs t organized under the laws of the State of _	Statutes, this DE	
in order	to change its registered office or i	registered agent, or both, in the State of F	Torida.	
1. The name of the	ation of Trust re-corporation: EXCHANGERIGH	T NET LEASED PORTFOLIO 13 DST		
2. The principal	office address: 200 S. Los Robles	Avenue, Suite 210, Pasadena, CA 9110	1	
0 TT	24 (:5 4:55			
3. The maining ac	ndress (II different):			
4. Date of incorp	oration/qualification: 07/25/2016	Document number: D160000	000028	
	street address of the current regist tment of State: (If resigned, enter re	ered agent and registered office on file wi esigned)	th the	
	Paracorp Incorporated			
	155 Office Plaza Drive, 1st Floor			
	Tallahassee	FL 32301	∀ دم	
6. The name and (if changed):		d agent (if changed) and /or registered of		
	Corporation Service Company		63	
	P.O. Box NOT acceptable F.O. Box NOT acceptable FIG. 32301			
	Tallahassee	FL 32301	Ö.	
as changed will	be identical.	street address of the business office of its	s registered agent,	
Such change wa authorized by th	s authorized by resolution duly ad a board, or the corporation has be Declaration of Trust	lopted by its beard of directors or by an or on notified in writing of the change.	officer so	
×	is E again	Jill Cilmi	Authorized Person	
	e of an officer or director	Printed or typed name and titl	Ċ	
I further agree t	o comply with the provisions of al	ent and agree to act in this capacity. It statutes relative to the proper and com and accept the obligation of my position or effect a change in the registered officified in writing of this change.	plete as registered e address, I	
By: Yme	nature of Registered Azent	07/18/2017 Date		
	half of an entity:			
	Asst. Vice President			
	/ped or Printed Name			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2EC45 (03/12)

* * * FUING FEE: \$35.00 * * *