## F02000004188

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(Address)
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SECRETARY
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUN	T NO. :	I20000001	95			
REFE	RENCE :	808752	8007383			
AUTHORIZ	ATION :		4. G			
COST	LIMIT :	\$135.00	Man			
ORDER DATE : June 9, 20	23					
ORDER TIME : 8:32 AM						
ORDER NO. : 808752-057						
CUSTOMER NO: 8007383						
CHANGE OF AGENT						
NAME: AEI INC	OME FUND	MANAGER, IN	C.			
PLEASE RETURN THE FOLLOW	ING AS PF	ROOF OF FILI	NG:			
CERTIFIED COPY						
XX PLAIN STAMPED CC	PΥ					
CONTACT PERSON: Alexxis	Weiland-	sorenson				
	EXAMI	NER'S INITI	ALS:			

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617. unge is submitted for a corporation or er to change its registered office or reg	ganized under the law	vs of the State of $N$	linnesota		
1. The name of	the corporation: _AEI INCOME FUND	D MANAGER, INC.				
2. The principal	office address: 30 East Seventh Stre	eet, Suite 1300, St. P	aul, MN 55101			
3. The mailing a	address (if different):					
4. Date of incorp	. Date of incorporation/qualification: 09/19/2002 Document number: F02000004788					
5. The name and	f street address of the current registere timent of State: (If resigned, enter resi	ed agent and registered	d office on file with	the		
	C T Corporation System			_		
	1200 South Pine Island Road			2023 SEC 7ALL		
	Plantation	FL	33324	SEE		
6. The name and (if changed):	I street address of the new registered a	agent (if changed) and	/or registered office	2023 JUN 27 PH SECRETARY : ALLAHASSE! J		
	Corporation Service Company			ΰ (		
	1201 Hays Street			(A)		
	P.O.	Box NOT acceptable	<del></del>			
	Tallahassee	FL	32301			
The street addre	ess of its registered office and the street be identical.	eet address of the bus	iness office of its r	egistered agent,		
Such change wa authorized by th	is authorized by resolution duly adopte board, or the corporation has been	oted by its board of di notified in writing of	irectors or by an off f the change.	ficer so		
$\times_{\kappa}$	e 2 agui	Jill Cilmi, Vice	President			
Argnetur	e of an Officer or director	Printed	d or typed name and title			
l further agree t of my duties, an document is bei corporation has	the appointment as registered agent to comply with the provisions of all s d I am familiar with and accept the cong filed merely to reflect a change in been notified in writing of this chang Service Company	tatutes relative to the obligation of my posit othe registered office	his capacity, proper and compl tion as registered a address, I hereby o	ete performance gent. Or, if this confirm that the		
By: ( & )	, M Lei	06/27/2023				
Sign	nature of Registered Agent		Date			
If signing on bel	half of an entity:					
Ami M. Casper,	Asst. Vice President					
Ту	ped or Printed Name					

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (04/13)