F1300000 4500

(Requ	uestor's Name)			
(Addı	ress)			
(Addi	ress)			
(City/	State/Zip/Phone	#)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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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: Meghan Groom meghan.groom@cscglobal.com

Date: February 3, 2020

Order#: 153402-061

Re: JAX RET PROP GP SPE, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{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: Meghan Groom c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

 \underline{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

statement of char	nge is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statu sized under the laws of the State of <u>GA</u> ered agent, or both, in the State of Florid			
1. The name of the	he corporation: JAX RET PROP GP SPI	E, INC.			
	office address: 1170 Peachtree ST., NE	——·			
3. The mailing ac	ddress (if different):				
4. Date of incorp	oration/qualification: 10/09/2013	Document number: F130000045	506		
	street address of the current registered a tment of State: (If resigned, enter resigned)	gent and registered office on file with the	e		
	C T CORPORATION SYSTEM				
	PLANTATION, FL 33324				
PLANTATION, FL 33324					
6. The name and street address of the new registered agent (if changed) and /or registered office (GC) (if changed):					
Corporation Service Company					
	電子である。 1201 Hays Street				
P.O Box NOT acceptable					
	Tallahassee	FL 32301			
The street addre as changed will	ss of its registered office and the street be identical.	address of the business office of its reg	gistered agent,		
Such change wa authorized by th	s authorized by resolution duly adopted board, or the corporation has been no	d by its board of directors or by an offic stified in writing of the change.	er so		
Xee ,	E agnie	Jill Cilmi, Vice President			
	e of an officer of director	Printed or typed name and title			
I further agree to of my duties, and document is being corporation has	the appointment as registered agent an ocomply with the provisions of all stated I am familiar with and accept the obling filed merely to reflect a change in the been notified in writing of this change of Service Company	utes relative to the proper and complet igation of my position as registered ago e registered office address, I hereby co	e performance ent. Or, if this onfirm that the		
By: Dia	co Cakuble	01/31/2020			
	nature of Registered Agent	Date			
If signing on bel	half of an entity:				
	Asst. Vice President vped or Printed Name				
	* * * FILING FI	EE: \$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314