

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H180001877143)))



H180001877143ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
 Fax Number : (850)617-6380

From: Account Name : C T CORPORATION SYSTEM
 Account Number : FCA000000023
 Phone : (614)280-3338
 Fax Number : (954)208-0845

FILED
 19 JUN 25 AM 7:36
 STATE OF FLORIDA
 TALLAHASSEE

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

Email Address: _____

**REGISTERED AGENT CHANGE
 FOUNDERS 3 MANAGEMENT COMPANY**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RECEIVED
 18 JUN 25 AM 8:31
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

Nachy
 R WHITE
 JUN 26 2018

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

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 organized under the laws of the State of Wisconsin in order to change its registered office or registered agent, or both, in the State of Florida

1. The name of the corporation: FOUNDERS 3 MANAGEMENT COMPANY
2. The principal office address: 252 EAST HIGHLAND AVENUE MILWAUKEE, WI 53202
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 07/27/2015 Document number: F15000003291
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)

NICOLE MONSANTO
684 GAZETTA WAY
WEST PALM BEACH, FL 33413

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

NRAI Services, Inc.
c/o NRAI Services, Inc., 1200 South Pine Island Road
Plantation, Florida 33324

P.O. Box NOT acceptable

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.

[Signature]
 Signature of an officer or director

DONALD CENIO, CFO, COO
 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 Kimberly Steinmetz NRAI Services, Inc. Vice Pres/Asst Sec. 06/25/2018
 Signature of Registered Agent Date

If signing on behalf of an entity:

 Typed 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 (03/12)

FILED

18 JUN 25 AM 7:38

STATE OF FLORIDA
 DEPARTMENT OF STATE