F1900000 1862

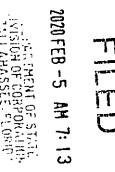
(Requ	uestor's Name)			
(Addı	ress)			
(Addi	ress)	_		
(City/	State/Zip/Phon	e #)		
PICK-UP	WAIT	MAIL		
(Bus	iness Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



200339864212

02/05/20--01016--012 **35.00



Ĉ

MAR 0 2 2020 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: Meghan Groom meghan.groom@cscglobal.com

Date: February 3, 2020

Order#: 153402-292

Re: TSO SARA REOPP GP SPE, INC.

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: Meghan Groom 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

statement of cha	nge is submitted for a corporation	17.0502, 607.1508, or 617.1508, Florida Statut organized under the laws of the State of <u>GA</u> registered agent, or both, in the State of Florid		
1. The name of t	he corporation: TSO SARA REOP	PP GP SPE, INC.		
		E ST, STE. 2000 ATLANTA, GA 30309		
4. Date of incorp	oration/qualification: 04/16/2019	Document number: F1900000186	52	
	street address of the current regist tment of State: (If resigned, enter r	tered agent and registered office on file with the resigned)		
	C T CORPORATION SYSTEM		2025	
	1200 SOUTH PINE ISLAND RC	DAD	2020 FEB	
	PLANTATION, FL 33324	The state of the s	疆山	
6. The name and (if changed):	street address of the new registero	ed agent (if changed) and /or registered office	AN 7: 13	
	Corporation Service Company		_	
P.O. Box. NOT acceptable				
	Tallahassee	FL 32301		
as changed will	be identical.	street address of the business office of its reg	_	
authorized by th	ne board, or the corporation has be	adopted by its board of directors or by an offic een notified in writing of the change.		
	e & Come	Jill Cilmi, Vice President Printed or typed name and title		
I further agree i of my duties, an document is bei corporation has	to comply with the provisions of a d I am familiar with and accept to	gent and agree to act in this capacity, all statutes relative to the proper and complete the obligation of my position as registered age to in the registered office address, I hereby con	ent. Or. if this	
<u>Ву:</u> Ду	real-Kubie	01/31/2020		
_	half of an entity:	Date		
Grace E. Kirby,	Asst. Vice President yped or Printed Name	-		

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