## F98000000337

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Document Number)		
Certified Copies		
Special Instructions to Filing Officer:		
	J	





000355241230

11/16/20--01026--005 \*\*35.00

RA RUCH8

OEF 2 2 2020

I ALBRITTON



CSC - WILMINGTON.. 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscqlobal.com

Date: November 12, 2020

Order#: 504081-063

Re: BECK HCB MANAGEMENT GP, INC.

Enclosed please find:

XX \_\_\_ Change of Registered Agent\_and Office.

XX Check in the amount of 35.

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: Ami Casper

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

Pursuant to the provisions of sections 607.0502, 617.0502, statement of change is submitted for a corporation organize in order to change its registered office or registere	ed under the laws of the State of Texas
1. The name of the corporation: BECK HCB MANAGEMEN	,
2. The principal office address: 1601 Elm Street, Suite 280	
3. The mailing address (if different):	
4. Date of incorporation/qualification: 01/14/1998	Document number: F98000000237
5. The name and street address of the current registered ager Florida Department of State: (If resigned, enter resigned)	
C T Corporation System	
1200 South Pine Island Road	
Plantation	FL 33324
6. The name and street address of the new registered agent (if changed):	(if changed) and /or registered office
Corporation Service Company	
1201 Hays Street	
	OT acceptable
Tallahassee	FL 32301
The street address of its registered office and the street ad as changed will be identical.	dress of the business office of its registered agent.
Such change was authorized by resolution duly adopted be authorized by the board, or the corporation has been notifi	y its board of directors or by an officer so led in writing of the change.
Xie & agni	Jill Cilmi, Vice President
Signature of an officer or director	Printed or typed name and title
I hereby occept the appointment as registered agent and a further agree to comply with the provisions of all statute of my duties, and I am familiar with and accept the obligation document is being filed merely to reflect a change in the recorporation has been notified in writing of this change.  Corporation Service Company	s relative to the proper and complete performance
By: Cli, M Ley	11/11/2020
Signature of Registered Agent	Date
If signing on behalf of an entity:	
Ami M. Casper, Asst. Vice President  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