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(Requestor's Name) (Address) (Address)	60))) 04184	13 4	12	6
(City/State/Zip/Phone #)			TALLAHASSEE, FLORIDA	2024 APR 11 AM 11: 47	
Special Instructions to Filing Officer:			SECRETARY OF STATE TALLAHASSEE, FLORIDA	2024 APR 11 AM 11: 18	RECEIVED
Office Use Only					

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	1200000001	95			
	REFERENCE	:	410196	8401661			
	AUTHORIZATION	n. Vill	De contra				
AUTHORIZATION COST LIMIT \$ 25.00							
	America 10, 0004						
ORDER DATE :	April 10, 2024						
ORDER TIME :	10:02 AM						
ORDER NO. :	410196-008						
CUSTOMER NO:	8401661						
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CHANGE OF AGENT

NAME: FALCON'S TREEHOUSE, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XX
 PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. N	ame of the limited liability company:	EEHOUS	JSE, L.L.C.			
2. (a)	6996 PIAZZA GRANDE AVENUE SUITE 301	((b) 6996 PIAZZA GRANDE AVENUE SUITE 301			
,	Principal office address of limited liability company: (<u>Note: MUST BE STREET ADDRESS</u>)	``	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	ORLANDO, FL 32835		ORLANDO. FL 32835			
	02/01/2000		L0000001282			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a	Registered Agent and Registered Office shown on the records o Brown, Bruce Registered Office Address (MUST BE FLORIDA STREET 6996 PIAZZA GRANDE AVENUE SUITE 301		<u>255)</u>			
(b)		L				
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office at	address:			
	Corporation Service Company					
	NEW Registered Office Address:					
	1201 Hays Street	<u> </u>				
	Tallahassee F	L_32301	1			
lf the	limited liability company is not organized under the la	ws of the	he State of Florida, it is hereby confirmed that after			

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Cecil Magpuri						Cecil Magpuri - authorized manager				
Signature of a member or authorized representative of a member				Printed or typed name of signee						

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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

<u>XInce</u> C.K. GRACE E. KIRBY. ASST VICE PRESIDENT Signature of Registered Agent

> Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00