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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APR 15 2019 T SCHROEDER



CSC - WILMINGTON
251 Little Falls Drive
Wilmington, De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Rachel O'hayer rachel.ohayer@cscglobal.com

Date: April 3, 2019

Order#: 709564/005

Re: RGL LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Rachel O'hayer c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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. 1 | Name of the limited liability company: RGL LLC | | | | |
|------------------------------------|--|--|--|---|--|
| 2 (a | 8815 CONROY WINDERMERE RD. | (b) | 8815 CC | NROY WINDERMERE RD. | |
| _, (| Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ (') | M | ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | |
| | BOX 343 | | BOX 343 | | |
| | ORLANDO, FL 32835 | _ | ORLANDO, FL 32835 | | |
| | 06/30/2005 | | L05000065 | 5454 | |
| 3. | Date of filing/registration in Florida | 4. | 1 | Document number | |
| 5. (a | CORPORATION SERVICE COMPANY | | | | |
| | Registered Agent and Registered Office shown on the records of t | the Florida l | Dept, of State: | | |
| | 1201 HAYS STREET | | | 1 | |
| | Registered Office Address (MUST BE FLORIDA STREET) | | | TO JECRETA SECRETA | |
| | TALLAHASSEE . FL | 32301 | | -5 - | |
| (b |) LA ROSE, RØBERT SCOTT | | | OF SIM | |
| ` | Enter name of NEW Registered Agent and/or NEW Registered | Office add | ress: | AH 9148 OF STATE EF, FLORIDA | |
| | 400 S OCEAN BLVD., UNIT 111 | | | | |
| | NEW Registered Office Address: | | | | |
| | | | | | |
| | DELRAY BEACH . FL. | 33483 | | | |
| the cl agent was/v | limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical! Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members o ticles of organization or the operating agreement of the | the regist ability con If the limit | ered office a npany, it is l ed liability | and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in | |
| /s/ | Robert Larose | Robe | rt Larose, M | lanager | |
| Sigi | nature of a member or authorized representative of a member | | 1 | Printed or typed name of signee | |
| provi the or to me notifi | eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address. I held in writing of this change. Robert Larose | ee to act i performa I for in Ci tereby coi | n this capac uce of my di lapter 605, ifirm that th | city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed we limited liability company has been | |
| | ture of Registered Agent | | | | |