11/5/23, 11:35 AM

Division of Corporations

Florida Department of State

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

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

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LLC REGISTERED AGENT CHANGE OPG EQUITY, LLC

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NOV 0 7 2023

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. Na	ame of the limited liability company: OPG EQUITY, LI	LC 	
2. (a)	6240 LAKE OSPREY DRIVE	(b) 6	240 LAKE OSPREY DRIVE
2. (11)	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)	_ (07_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SARASOTA, FL 34240		ARASOTA, FL 34240
	03/03/2006	1.0	6000023235
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	RUSSELL ALLEN		
, ,	Registered Agent and Registered Office shown on the records of t	pt. of State.	
	6240 Lake Osprey Dr.		
	Registered Office Address (MUST BE FLORIDA STREET A		
	Sarasota , FL	34240	20
			1023 NOV -6
(b)	C T Corporation System		
, . ,	Enter name of NEW Registered Agent and/or NEW Registered	5 F	
	NEW Designation and the second		
	NEW Registered Office Address: 1200 South Pine Island Road		7: 1,1
	1200 South Pine Island Road		
	Plantation , FL	33324	
the cha agent v was/wo	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the register ability comp of the limited limited liab	ed office and the business office of the registered bany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in ility company.
das longe			KOROSEC, MANAGER
-	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the ohl to merc notified By:	by accept the appointment as registered agent and agnoss of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I fill writing of this change. CT Corporation System The of Registered Agent SEANLEMERICK, ASSISTANT SECRETARY	ee to act in performanc I for in Cha wreby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept upter 605, F.S. Or, if this document is being filed irm that the limited liability company has been