(Requestor's Name)							
	· · · · · · · · · · · · · · · · · · ·						
(Address)							
(Address)							
(
(City/State/Zip/Phone #)							
PICK-UP	WAIT MAIL						
(Business Entity Name)							
(Document Number)							
Cartifiert Carries	Cartificator of Status						
Certified Copies Certificates of Status							
Special Instructions to Fi	ling Officer:						
Special instructions to Fi	ing Officer.						
	· · ODNE						
J. HORNE							
APR - 8 2024							
APK - 6 2021							

Office Use Only



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FILED 2024 APR -35 PM 10: 00

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

ACCOUNT NO. : 12000000195						
REFERENCE : 390957. 28447728						
AUTHORIZATION :						
COST LIMIT : \$ 35.00						
ORDER DATE : April 4, 2024						
ORDER TIME : 12:38 PM						
ORDER NO. : 390957-005						
CUSTOMER NO: 8447728						
CHANGE OF AGENT						
NAME: RODA MANAGEMENT, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Shauna Godbolt EXT#						
EXAMINER:						

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMPTED 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.

I. N	lame of the limited liability company:	RODA Manager	nent, LLC		
2. (a)	·		(b)		
.,	Principal office address of limited lieb (Note: MUST BE STREET AD) 201 NE Wavecrest Court	* * *			nited liability company: UST OFFICE ROX)
	Boca Raton, FL 33432			ra Raton, FL 33432	
3.	Date of filing/registration in I	lorida	4.	Document number	r
5 (a)	Registered Agent and Registered Office shows Perry, Isonberg			of State:	
	Registered Office Address MUST RE FL 201 NE Wavecrest Court	ORIDA STREET A	IDDRESS)		
(b)	Boca Raton	, FL	33432		2024 APR 360000 5711 665
	Enter name of NRW Registered Agent and/or Corporation Service Company NRW Registered Office Address 1201 Hays Street	EW Registered	Office address:		-5 PHIO: 00
	Tallahassee	, FL	32301		
Signat was/was the arti	imited liability company is not organize or changes are made, the Florida street will be idemical. Or, in the case of a Florier authorized by an affirmative vote of cles of arganization or the operating agreed a manner of subprised representative of the proper igations of my position as registered officer of the proper igations of my position as registered officer reflect a change in the registered officer writing of this change.	pouress of the rida limited list the members of the liment of the limenter	the limited limited limited liability	ce and the business office, it is hereby confirmed ability company or as off company. Cluber Printed or typed name	c of the registered that the change(s) herwise provided in
	Division of Corpora	Zionse P.O. Re	nx 6327 a Ta ll	Inhaccon FI 32314	

INHS18 (2/14)