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(Requestor's Name)
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PICK-UP WAIT MAIL
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O SIMMONS MAY 1 4 2020



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 866.625.0838 COGENCYGLOBAL.COM

Account#: I20000000088

Date: May 12	2, 2020		Accountin. 12000000000	
Name: KEN H	OWELL			
Reference #:	1219913			
Entity Name:		COZ4, LLC		
Articles of Incorp	oration/Authoriz	ation to Transact Bus	iness	
Amendment				
Change of Agen	t		ISSUES? CALL	
Reinstatement		KEN:	KEN:	
☐ Conversion			518-213-0738	
Merger				
☐ Dissolution/With	drawal			
Fictitious Name				
Other				
Authorized Amount	: \$25.0	0		
Signature:				

COVER LETTER

TO:	_	stration Section sion of Corporations					
SUBJI	ECT:	COZ4, LLC					
		Name of Limited Liability Company					
Dear S	Sir or N	1adam:					
The er	closed	Registered Agent/Registered Offi	ce Change and	fee(s) are submitted for filing.			
Please	return	all correspondence concerning thi	s matter to the f	ollowing:			
ADR	IANN.	A LIGHT					
	-	Name of Person		_			
DUG	GAN	BERTSCH, LLC					
		Firm/Company					
303 \	WEST	MADISON, SUITE 1000					
	-	Address		_			
CHIC	CAGC	, ILLINOIS 60606					
		City/State and Zip Code					
DLIT	TWIN	I@DUGGANBERTSCH.COM	1				
<u>_</u>	E-mail	address: (to be used for future ann	ual report notifi	cation)			
For fu	rther is	nformation concerning this matter,	please call:				
ADR	IANN.	A LIGHT	312	263-8600			
		Name of Person		Area Code & Daytime Telephone Number			
	Regi Divi Clift 2661	SEET/COURIER ADDRESS: Istration Section Ission of Corporations Is an adding I Executive Center Circle	Reg Div P.O	ristration Section rision of Corporations D. Box 6327 Rahassee, Florida 32314			
Enclosed is a check for the following amount:							
	□ \$:	25 Filing Fee	□ \$ 5	5 Filing Fee & Certified Copy			
INHS1	8 (2/14))					

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.

(a)	6300 RIVERSIDE DRIVE 6301 (b)		2001 BUTTERFIELD ROAD				
. (07	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)				
	PARKLAND, FLORIDA 33067	S	SUITE 1750				
		D	OOWNERS GROVE, ILLINOIS 33324				
	06/05/2009	L0	9000054998				
	Date of filing/registration in Florida	4.	Document number				
(a)	CT CORPORATION SYSTEM						
. (11)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address	ET ADDRESS)	2020 11.				
	Registered Office Address (MUST BE FLORIDA STRE	F1. 33324	2020 17.77 1.3				
(b)							
(b)	PLANTATION	FL 33324	ධ ල				
(b)	PLANTATION COGENCY GLOBAL INC.	FL 33324					
(b)	PLANTATION COGENCY GLOBAL INC. Enter name of NEW Registered Agent and/or NEW Registered.	FL 33324	ධ ල				
(b)	PLANTATION COGENCY GLOBAL INC. Enter name of NEW Registered Agent and/or NEW Registered 115 NORTH CALHOUN STREET	FL 33324	<u>~</u> ⇔				

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.

and of the	MICHAEL J. COSTELLO		
Signature of a member or authorized representative of a member	Printed or typed name of signee		
I beroby account the appointment as registered agent and ag	ree to act in this canacity. I further agree to comply with the		

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 lamiliar 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.

Sighature of Registered Agent