Division of Corporations

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address:	2019FEB 27 PM 12: 01
Account Name : REGISTERED AGENTS INC. Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010 **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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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.

7 107/10					
1. N	Jame of the limited liability company: Gyre Inv	vestme	ents, LLC		
2. (a)	1050 Crown Pointe Pkwy	(b	(b) 1050 Crown Pointe Pkwy Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 950 ATLANTA, GA 30338		
	Principal office address of limited liability company:	· ·			
	(Note: MUST BE STREET ADDRESS)				
	Suite 950				
	ATLANTA, GA 30338				
	06/30/2010		L10000069655		
3.	Date of filing/registration in Florida		Document	number	
5 () Philipp, Michael				
5. (a)	Registered Agent and Registered Office shown on the records	of the Florida	Dept_of State:		
	22 Marsh Point Road				
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	 2		
				20	
	Amelia Island	_{FL} 32034	<u> </u>	2019 FEB 27	
(b)	Registered Agents Inc.			FEB 27 PH	
•	Enter name of NEW Registered Agent and/or NEW Register	ed Office add	tress:	Hand of the state	
	7901 4th St N		•	PH 12: 0	
	NEW Registered Office Address.			[·] 	
	STE 300				
	St. Petersburg	33702	<u> </u>		
the cl agent was/v	limited liability company is not organized under the range or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited vere authorized by an affirmative vote of the member ticles of organization or the operating agreement of the	of the regis liability co s of the lim	stered office and the bu impany, it is hereby co iited liability company	isiness office of the registered nfirmed that the change(s)	
	Rima Pak		y Park		
Sign	nature of a member or authorized representative of a member		Printed or ty	ped name of signee	

Thereby 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 worther of the change.

natified in writing of this change.

Bill Havre - Assistant Secretary

Signature of Registered Agent