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**GENERORS** 

Y SULKER OCT 27 2021

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

ACCOUNT NO. : I2000000195					
REFERENCE : 159856 7779145					
AUTHORIZATION: Spelle Ban					
COST LIMIT : \$ 25.00					
ORDER DATE: October 22, 2021					
ORDER TIME : 3:06 PM					
ORDER NO. : 159856-047					
CUSTOMER NO: 7779145					
CHANGE OF AGENT					
NAME: CODINA MANAGER, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY					
XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker EXT#					
EXAMINER:					

## 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. N	lame of the limited liability company:	AGER, LLC	
2. (a)	2020 Salzedo Street 5th Floor	(b) 2020 Salzedo Street, 5th Floor	
(42)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing	address of limited liability company:  E: MAY BE POST OFFICE BOX)
	CORAL GABLES, FL 33134	CORAL GABLE	ES, FL 33134
	09/10/2014	L14000141631	
<ol> <li>(a</li> </ol>	Date of filing/registration in Florida ROMERO, RAFAEL	4. Docu	ment number
	Registered Agent and Registered Office shown on the records of 2020 Salzedo Street, 5th Floor	the Florida Dept. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	CORAL GABLES, FI	33134	~? 
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	d Office address:	TERRY SEEFFE
	NEW Registered Office Address:		115 0
	1201 Hays Street		PTE 27
	Tallahassee Fi	32301	
chang agent was/w	limited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	e registered office and the bability company, it is herebof the limited liability com	ousiness office of the registered by confirmed that the change(s) pany or as otherwise provided in
	Line & Comi	Jill Cilmi, Authorized Person	
I here provis the ob to mer notifie	ature of a member or authorized representative of a member why accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide selv reflect a change in the registered office address, I din writing of this change.	ree to act in this canacity	d or typed name of signee I further agree to comply with the and I am familiar with and accept Or, if this document is being filed nited liability company has been
	ure of Registered Agent L. Kirby, Asst. Vice President of Corporation Service Company		