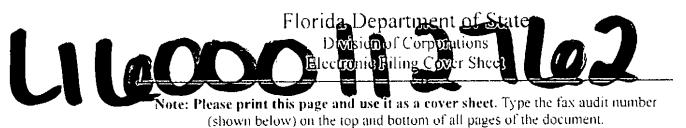
5/21/2020

Division of Corporations



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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

\*\*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 TEMERITY CAPITAL SADDLEBROOK II, LLC

Certificate of Status	0
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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

I. No	ame of the limited liability company: TEMERITY CA	PITAL SAD	DDLEBROOK II, LLC
2. (a)		(b)	
(w)	Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )		Mailing address of limited liability company: (Note: MAY RE POST OFFICE BOX)
	3730 North Ocean Drive Unit 7B		1120 20th St NW Suite 720S
	Riviera Beach, FL 33404		WASHINGTON, DC 20036
	06/10/2016	L	L16000112762
3.	Date of filing/registration in Florida		Document number
دين ۾	SANDLER ANDREWT		
5. (a)	Registered Agent and Registered Office shown on the records o	f the Florida F	Dept, of State:
	Registered Office Address (MUST BE FLORIDA STREET	(ADDRESS)	FG 52
	3730 North Ocean Drive Unit 7B		
	Riviera Beach, F	33404 L	SECAL IAX
(b)	C T Corporation System		
	Enter name of NEW Registered Agent and/or NEW Registere	d Office addr	Iress: 02 Se 27
	NEW Registered Office Address:		<del></del>
	1200 South Pine Island Road		
	Plantation F	L_33324	
the cha agent was/w the art Signa I here provise the ob- to mer	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members ides of organization or the operating agreement of the number of a member of authorized representative of a member thy accept the appointment as registered agent and as it in so of all statutes relative to the proper and completely reflect a change in the registered affice address, and in writing of this change.  Bree Zahner, Asst. Secretary	of the regist iability con of the limite limited lia Andre	mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in iability company.  rew L. Sandler  Printed or typed name of signee  This connective I further goree to comply with the