11/8/2019

Ployida Department of Strate Division of Corporations Electronic Titing Royer Sheet

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To:

Division of Corporations Fax Number : (850)617-6383

From:

Account Name: ; REGISTERED AGENTS INC.

Account Number::120090000081 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:

LLC REGISTERED AGENT CHANGE

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Help

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	ame of the limited liability company: Stor-Pr	o Lehigh	1 LLC					
2. (a)	· · · ———	(b) _						
_, ,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE PQST OFFICE BOX)				
	7901 4th St N STE 300	7	7901 4th St N STE 300 St. Petersburg FL 33702					
	St. Petersburg FL 33702							
	04/04/17	L.	L17000079651					
3.	Date of filing/registration in Florida	4.	Do	cument nu	mber	~ 1.2		
5. (a)	Brennan Manna Diamond							
., (11)	Registered Agent and Registered Office shown on the record-	s of the Florida De	ept. of State:					
	7901 4 ST N STE 300							
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRESSI						
	ST PETERSBURG	_{. FL} 33702		33	•			
(b)	Northwest Registered Agen	t LLC			AON 6102	***		
	Enter name of NEW Registered Agent and/or NEW Registe	ered Office addre	<u>88</u> :		- A0	Wall and		
	7901 4th St N				යා ලා			
	NEW Registered Office Address:			Ë	ີ ບ			
	STE 300			Lung	 #			
	St. Petersburg	. FL 33702		a. ·	ಜು			
the chagent was/withe art	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membe icles of organization or the operating agreement of	s of the registe d liability comers of the limite the limited liab	red office and pany, it is he ed liability co	d the busin reby confi mpany or	ress offi rmed th	ice of the regi at the change(stered (s)	
Signa	ature of a member or authorized representative of a member		Pri	nted or typeo	I name of	-ignee		
provis the ob to mer	by accept the appointment as registered agent and ions of all statutes relative to the proper and compligations of my position as registered agent as provedy reflect a change in the registered office address of in writing of the change.	agree to act in lete performan ided for in Ch s, I hereby con,	this capacit ce of my dui apter 605. F. firm that the	v. I furthe es, and I a S. Or, if t limited lia	r agree un famil his docu bility co	to comply wit iar with and c iment is being impany has be	th the accept g filed een	

Signature of Registered Agent

Love Tom Glover - Assistant Secretary