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Account Number : FCA000000923 Phone : (614)280-3338 Fax Number : (614)573-3996

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r: 1	Address			

## LLC REGISTERED AGENT CHANGE STUDIO MH, LLC

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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.

l Na	ame of the limited liability company: Studio MH IIc				
	5441 NE 21ST TERRACE	(h) 5441 NE 21ST TERRACE			
. (w)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited hability company:  (Note: MAY BE POST OFFICE BOX)			
	FORT LAUDERDALE, FL 33308	_	FORT LA	UDERDALE, FL 33308	
	01/08/2018		L18000007	7234	
3. 5. (a)	Date of filing/registration in Florida WILSON RATLEDGE, PLLC	4.		Document number	
	Registered Agent and Registered Office shown on the records of t THR TY-THREE SE FIFTH STREET  #260 Registered Office Address (MUST BE FLORIDA STREET A				
	FORT LAUDERDALE. F1. C T Corporation System  Enter name of NEW Registered Agent and or NEW Registered		ddress:	- -	2024FEB 16 PH
	NEW Registered Office Address: 1200 South Pine Island Road		_	2: 1	
	Plantation, FL_	33324		_	
the cha agent v was/wo	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reg bility of the fir	istered offic company, it nited liabili	e and the business office is hereby confirmed that ty company or as otherw	e of the registered the change(s)
		Ма	rk hansop		
Signa	turg of a member or authorized representative of a member			Printed or typed name of sig	gnec
provisi the obl to mere	by accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I I d'in writing of this change. CT Corporation System Rachel O'Conner Assistant Secretary	ee to ac perform I for in acreby (	a in this cap nance of my Chapter 60 confirm that	pacity, I further agree to duties, and I am familia 5, F.S. Or, if this docum the limited liability com	comply with the r with and accep ent is being filed (pany has been

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Signature of Registered Agent