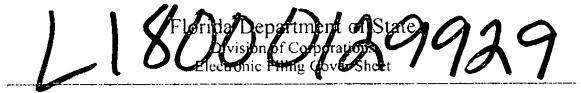
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O GIRARAONS OCT 9 : 2018

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. Na	ame of the limited liability company: Bay Park Deve	elopm	en	t, LLC		
2. (a)	301 West Platt Street	(b) Post Office Box 5689				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(\	- v	M	Initing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Suite 353		٦	Гатра, F	FL 33675	
	Tampa, FL 33606		_			
	May 24, 2018		L1	1800012	9929	
3.	Date of filing/registration in Florida	4.		i	Document number	
5. (a)	John T. Keiser					
` '	Registered Agent and Registered Office shown on the records of th	e Florida	De	pt. of State;		
324 Blanca Avenue						
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	Tampa gradu	33606			•	
	, , ,					
(ե)	C T Corporation System					
	Enter name of NEW Registered Agent and/or NEW Registered C	office adi	dre	? 2:	,	
	1200 South Pine Island Road					
	NEW Registered Office Address:					
					- 5	
	Plantation FI.3	3324				
the char agent w was/wer	nited liability company is not organized under the laws age or changes are made, the Florida street address of the besidentical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of less of organization or the operating agreement of the liable.	ne regis vility co the limi mited li	iter inp itec iab	ed office a cany, it is l d liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in any.	
Signam	re of il member or authorized representative of a member	- 5011	-		rinted or typed name of signee	
l hereby provision he oblight o merel	y accept the appointment as registered agent and agree ns of all statutes relative to the proper and complete po- gations of my position as registered agent as provided j y reflect a change in the registered office address. I he in writing of this change.	e to act erforma for in C reby ca	in inc ha infi	this capac	in I further agree to comply with the	
Cignotic	Judith Argao Vice President					
218Tutm	of Registros and Assistant Secreta	ry				
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314						