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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Fax Number : (614)573-3996

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LLC REGISTERED AGENT CHANGE HORIZON PARK HOTEL PROPERTIES, 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.

	me of the limited liability company:	(h) 99	9999 E Exploration Court			
!. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b) <u></u>	Mailing address	of limited hability company BE POST OFFICE BOX	:	
	Sturtevant, WI 53177	Stu	urtevant, WI 53177			
	07/20/2018	1.18	000175467			
	Date of filing/registration in Florida WWMR STATIJTORY AGENT, LLC	4.	Document n	number		
5. (a)	Registered Agent and Registered Office shown on the records of 9045 STRADA STELL COURT	the Florida Dept	t, of State			
	Registered Office Address (MUST BE FLORIDA STREET. 4TH FLOOR	ADDRESS)		202 56 TAL		
	NAPLES , FL	34109		2024 OCT 21 PM SECRETARY SE TALLAHASSEELF	7	
(b)	C T Corporation System			21 SSE		
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	:	PM 2: 58 SE STATE E. FLORID	ו כ	
	NEW Registered Office Address:					
	1200 South Pine Island Road					
	Plantation FL					
ne cha gent w ras we ne arti	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered ability compa of the limited limited liabil	d office and the bus my, it is hereby con liability company o	siness office of the regis firmed that the change(:	tere s)	
Signat	ture of a member or authorized representative of a member		Printed or typ	ed name of signee		
herch rovisione oblo mercotified	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ily reflect a change in the registered office address. I I'm writing of this change. C T Corporation System	ee to act in the performance d for in Chap hereby confir	his capacuv. I furth of my duties, and I uer 605, F.S. Or, if m that the limited li	her agree to comply wid am familiar with and a This document is being iability company has be	r the ccep filed an	

Signature of Registered Agent | SEAN L EMERICK ASSISTANT SECRETARY