## 18000 203464

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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ALLAHASSEE, FLOR

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	: 1	2000000	0195						
REFERENCE	: 1	86339	8394762						
AUTHORIZATION	:	Land	X						
COST LIMIT	: \$	25.00	Elenan						
	<b></b>	<b></b>							
ORDER DATE : December 7, 2022									
ORDER TIME : 1:54 PM									
ORDER NO. : 186339-297									
CUSTOMER NO: 8394762									
CHANGE OF AGENT									
NAME: EPICVANBRIDGE	LLC								
PLEASE RETURN THE FOLLOWING AS	PROC	F OF FI	LING:						
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Eyliena Baker	E	XT#							

EXAMINER:

## '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	me of the limited liability company: EPICVANBRII	DGE LLC		
2	(a)		(	'h)	
	(4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		. U , _	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1 CALIFORNIA STREET SUITE 400		(	3000 EXECUTIVE PKWY STE 325
		SAN FRANCISCO, CA 94111		-	SAN RAMON, CA 94583
		08/24/2018		L	L18000203464
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)				
	(")	Registered Agent and Registered Office shown on the records of NRAI SERVICES, INC.	of the Florid	la D	Dept, of State:
		Registered Office Address (MUST BE FLORIDA STREE	T ADDRES	<u>(S)</u>	
		1200 S PINE ISLAND RD			7A.
		PLANTATION , I	33324		2022 DEC 15 AM 9:
					S A A
	(b)	Enter name of NEW Registered Agent and/or NEW Register			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office a	<u>ddr</u>	9 02
		Corporation Service Company			N
		NEW Registered Office Address:			
		1201 Hays Street			
		Tallahassee	-L_32301		
ch ag wa	ange ent v is/we	imited liability company is not organized under the loor changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members clessof organization or the operating agreement of the	ne register liability co s of the lin ne limited	ed omp nite liab	I office and the business office of the registered appany, it is hereby confirmed that the change(s) led liability company or as otherwise provided in ability company.
_		Je & a Que	Jill ——	Cili	ilmi, Authorized Person
I i pro the to no	- herei ovisi obl mere tifiec	by eccept the appointment as registered agent and as one of all statutes relative to the proper and completing at the statutes relative to the proper and completing at the statutes relative to the proper and completing at the statutes relative to the proper and completing at the statutes of the registered agent as provided in the registered office address. If in writing of this change.	gree to ac e perform led for in ( I hereby c	t in nanc Cha conf	Printed or typed name of signee  In this capacity. I further agree to comply with the nce of my duties, and I am familiar with and accept napter 605, F.S. Or, if this document is being filed after that the limited liability company has been
		te of Registered Agent - X E. Kirby, Asst. Vice President			