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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.

2. (a)	(b)_	
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
1200 ANASTASIA AVENUE SUITE 500		1200 ANASTASIA AVENUE SUITE 500
CORAL GABLES, FL 33134	(CORAL GABLES, FL 33134
11/07/2018	Ľ	8000261523
3. Date of filing/registration in Florida	4.	Document number
5. (a) Registered Agent and Registered Office shown on the record		
Registered Agent and Registered Office shown on the record JOHN, BUSH, JR	ls of the Florida D	ept. of State:
Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)	
1200 ANASTASIA AVENUE SUITE 500		
CORAL GABLES	. FL_33134	FIL 2024 HAY 17 TALL TAHA
(b)		S
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	tered Office addre	SEE F
Corporation Service Company		2: 28 2: 28
NEW Registered Office Address:		
1201 Hays Street		
Tallahassee	.FL 32301	
If the limited liability company is not organized under the change or changes are made, the Florida street address of agent will be identical. Or, in the case of a Florida limite was/were authorized by an affirmative vote of the member the articles of organization or the operating agreement of	the registered of liability compers of the limite	office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
/S/ Anthony M. Zirille	Anthor	ny M. Zirille, Authorized Person
Signature of a member or authorized representative of a member		Printed or typed name of signee

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Signature of Registered Agent Grace E. Kirby, Asst. Vice President