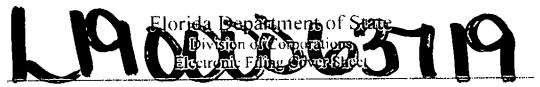
8/12/2019

Division of Corporations



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LLC REGISTERED AGENT CHANGE FLORIDA VALUATION, LLC

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AUG 1 3 2019

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 hability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

FloridaValuation,LLC

I. Na	me of the limited liability company: Horida Valuation,	,1.1.C						
2. (a)		_ (b)					
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing	address of lit : MAYBE I	mited liabil	ity comj	oany:
	806RiversideAve		Attn: Legs	il Dept	, 400 South	Hope Stre	ei, 25il	ı Flaor
	JacksonvilleF1.32204	_	Los Angel	es CA s	90071			
	08-17-13		1.19000063	719				
3.	Date of filing/registration in Florida	4.		Docu	ment numb	ber		
5. (a)	NicholasChop							
J. (u)	Registered Agent and Registered Office shown on the records of	the Florid	a Deptiof Sta	re:				
	Registered Office Address (MUST BE FLORIDA STREETA	DDRES!	Ŋ.					
	806RiversideAve.			_			2019	
	Jacksonville , FL	32204		_			AUG	'n.
(b)	CTCorporationSystem					• • •	§ 12	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> .						PH H:	D. 1
	NEW Registered Office Address:			_			က	
	1200SouthPineIslandRoad			_				
	Plantation, FL	33324		_				
the cha agent was/w the art	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited line ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regability confithe limited	stered offic ompany, it nited liabili liability co	ee and is here ity com mpany	the busines by confirm pany or as	ss office the description of the second seco	he chai se prov	nge(s) rided in
	iture of a member or furthorized representative of a member	Uind	c Kee, VP and	Asst. See	retary of Florid			ic , its sole memb
Sigm	iture of a melifiberor authorized representative of a member				ed or typed n	_		
provis the ob to mer	the accept the appointment as registered agent and agentions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elverges a change in the registered office address, I had in writing of this change. CFC orporation System OF Registered Agent	r perjorn ed for in hereby c	chapter 60 Chapter 60 Confirm tha	pacity. v duties 95, F.S. t the lii	I further on a further of the second further	agree 10 c familiar k docume lity comp	comply with a ners be any ha	nd accept and filed as been
Signati	me of Registered Agent Maria Ozaeta, Vice President							