L19000/31176

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Office Use Only







O SIMMONS

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195

REFERENCE : 201735 8267821 AUTHORIZATION : Spelle Reference COST LIMIT : \$ 25.00

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ORDER DATE : March 4, 2020

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- ORDER TIME : 3:02 PM
- ORDER NO. : 201735-020
- CUSTOMER NO: 8267821

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CHANGE OF AGENT

NAME: BANX WHOLESALE PROPERTIES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Kadesha Roberson -- EXT#

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.

a)		(1)	
<i>,</i>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	、	,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
2	2710 Gateway Oaks Drive Suite 150 N		1412 Coll	lier Street Buliding A
5	Sacramento CA 95833-3500		Austin, T	X 78704
	05-15-2019		L190001	31176
_	Date of filing/registration in Florida	4.		Document number
a) F	REGISTERED AGENTS INC			
· —	egistered Agent and Registered Office shown on the records of	of the Florid	a Dept. of Su	
	7901 4TH STREET N SUITE 300			2020
R	tegistered Office Address (MUST BE FLORIDA STREE)	ADDRES	<u>9</u>	2020 MAR 31 CRE VALV
_	ST. PETERSBURG , F	L3(3702	
/	Corporation Service Company nter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> e	ed Office ad	dress:	
	1201 Hays Street			
N	IEW Registered Office Address:			—
 т	Tallahassee	L 32301		_
hang : will vere	ited liability company is not organized under the l ge or changes are made, the Florida street address l be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members es of organization or the operating agreement of the Last Limit	of the regi liability co of the lin e limited	stered offic ompany, it nited liabili liability co	ce and the business office of the regist is hereby confirmed that the change(s ity company or as otherwise provided
	Last Anth	S	cott Smith	

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Value X Signature of Registered Agent Corporation Service Company

Roxanne Turner Asst. Vice President

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00

BY: