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## LLC REGISTERED AGENT CHANGE LSH HOLDCO, LLC

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K. SALY JUL 15 2024

From: David Thomas

## 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)	633 N. FEDERAL HWY		(b) 633 N. FEDERAL HWY			
()	Principal office address of limited liability company.  (Note: MUST BE STREET ADDRESS)		#300	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	#300					
	FT LAUDERDALE, FL 33308		FT LAU	JDERDALE, FL 33308		
	01/06/2020		1,2000000	03801		
	Date of filing/registration in Florida	4.		Document number		
(a)	CORPORATION SERVICE COMPANY					
(b) _	Registered Agent and Registered Office shown on the records of	he Fie	rida Dept. of S	tate:		
	1201 HAYS STREET					
	Registered Office Address (MUST BE FLORIDA STREET)	—				
	TALLAHASSEE , FL	3230		24 JUL 12 AM 4: 32		
	C T Corporation System					
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	address:	- 1.0 A 1.1 3.2		
	NEW Registered Office Address:			<del></del>		
	1200 South Pine Island Road			_		
	Plantation , FL	3332	1	_		
chai nt w s/we artic	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- tere authorized by an affirmative vote of the members of closed organization or the operating agreement of the uncot a member of authorized representative of a member	the r ability f the	egistered off company, i limited liabi	ice and the business office of the registe t is hereby confirmed that the change(s) lity company or as otherwise provided i		
wisio obli nere	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 provided by reflect a change in the registered office address, I in I in writing of this change. CT Corporation System	ee 10 perfa 1 for nereb	act in this cornance of m in Chapter 6 y confirm the	apacity. I further agree to comply with my duties, and I am familiar with and ac 05, F.S. Or, if this document is being f at the limited liability company has bee		

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

By: SEAN L. EMERICK, ASSISTANT SECRETARY
Signature of Registered Agent