L20000240808

	(Requestor's Name)				
	(Address)				
(Address)					
	(City/State/Zip/Phone #)				
PICK-UF	MAIL MAIL				
	(Business Entity Name)				
(Document Number)					
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AUG - 9 2022 M. SOLOMON

COVER LETTER

TO: Registration Section Division of Corporations			
STERLING GROUP (GP LLC		
<u>.</u>	Name of Limi	ited Liability Company	
Dear Sir or Madam:			
The enclosed Registered Agent/R	egistered Office Chang	e and fee(s) are submitted for filing.	
Please return all correspondence o	concerning this matter to	o the following:	
James R. Pratt			
Name of	Person		
Burr & Forman LLP			
Firm/Cor	npany		s≖ δ !
200 S. Orange Avenue, Suite 800			. •
Address	S		
Orlando, FL 32801			
City/State an	d Zip Code		
jpratt@burr.com			C
E-mail address: (to be used	or future annual report	notification)	
For further information concerning	g this matter, please cal	11:	
James R. Pratt	407 at (540-6655	
Name of Person		Area Code & Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	S	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for t	he following amount:		
■ \$25 Filing Fee		S55 Filing Fee & Certified Copy	

INHS18 (2/14)

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.

1. N	ame of the limited liability company:	OUP GP I	LLC	
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)
	20 Rivermede Road, Suite 204		20 Riverm	nede Road, Suite 204
	Concord, Ontario L4K3N3 CA		Concord,	Ontario 1.4K3N3 CA
	08/19/2020		1.20000240	808
3.	Date of filing/registration in Florida	4.		Document number
5. (a))			
	Registered Agent and Registered Office shown on the records of CORPORATION COMPANY OF ORLANDO	the Floric	la Dept. of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET 300 SOUTH ORANGE AVENUE STE 1600 (MDT)	ADDRES	<u>S)</u>	_
	ORLANDO , FI	32801		_
(b)	Enter name of NEW Registered Agent and/or NEW Registered Burr & Forman LLP	d Office a	ddress:	- · · · · · · · · · · · · · · · · · · ·
	NEW Registered Office Address:			** ·- · · · · · · · · · · · · · · · ·
	200 S. Orange Avenue, Suite 800			_
	Orlando , FI			
hange igent vas/w	limited liability company is not organized under the large or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members of the programmation or the operating agreement of the	ws of the register ability c of the lin limited	e State of Flored office an ompany, it in nited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
\$ gna	ature of a member or authorized representative of a member			Printed or typed name of signee
provis he ob o mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I do not in writing of this change.	ree to ac perform d for in hereby c	t in this cap ance of my Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is heing filed the limited liability company has been
Šignali	ure of Resistored Acoust			



July 26, 2022

JAMES R. PRATT BURR & FORMAN LLP 200 S. ORANGE AVENUE, SUITE 800 ORLANDO, FL 32801

SUBJECT: STERLING GROUP GP LLC

Ref. Number: L20000240808

We have received your document for STERLING GROUP GP LLC. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The form you submitted is for a Florida Partnership, but your entity is a Florida LLC. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon Senior Section Administrator

RECEIVED

AUG 0 8 2022

Letter Number: 122A00016689