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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195 REFERENCE : 529168 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE : July 1, 2024 ORDER TIME : 9:16 AM ORDER NO. : 529168-067 CUSTOMER NO: 7560577 CHANGE OF AGENT NAME: BAINBRIDGE MONOCACY CENTER MEMBER, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Shauna Godbolt -- 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.

1. Na	ame of the limited liability company:	E MONOCAC	Y CENTER M	IEMBER, LI	LC			
2. (a)	12765 W. Forest Hill Blvd.	(b) 12765 W. Forest Hill Blvd.						
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 1307					
	Suite 1307							
	Wellington, FL 33414		Wellington, F	L 33414				
	08/21/2020	L	20000247381					
3.	Date of filing/registration in Florida		Doc	cument nun	ıber			
5. (a)	BCRA, LLC							
J. (u)	Registered Agent and Registered Office shown on the records	of the Florida I	Dept. of State:					
	Registered Office Address (MUST BE FLORIDA STREET	ET ADDRESS)						
	SUITE 310				t .	2[
	Boca Raton	FL_33431			ALLAHASSEE.	124 JI	$\overline{1}$	
(b)	Enter name of NEW Registered Agent and/or NEW Registe	nt and/or NEW Panistared Office address				2024 JUL 15		
	Corporation Service Company	reo Orace audi	ess .		AM 10: 08 C. FLORIDA	AM 10: 08		
	NEW Registered Office Address:				DA DA	œ		
	1201 Hays Street							
	Tallahassee	FL_32301						
change agent v was/we the arti /s/ Cl	imited liability company is not organized under the or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the phillips	the registered liability comes of the limit the limited lia	office and the pany, it is her ed liability co	e business o reby confirm mpany or as y.	office of the of the of the office of the of	he regi: he chai se prov	stered nge(s)	
Signa	ignature of a member or authorized representative of a member				Printed or typed name of signee			
provisi the obl to mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as providely reflect a change in the registered office address. If in writing of this change.	igree to act in te performan ded for in Ch I hereby con	this capacity ce of my dutic apter 605, F.S firm that the l	: I further o es, and I am S. Or, if thi imited liabi	agree to o familiar s docume lity comp	comply with a nt is be any ha	with the nd accept sing filed s been	
Signatu	re of Registered Agent							

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

Elizabeth A. Dawson, Asst. Vice President on behalf of Corporation Service Company

INHS18 (2/14)