2000398851

(Requestor's Name)						
(Address)						
(Address)						
(C	City/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificate	s of Status				
Special Instructions to Filing Officer:						

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CORPORATION SERVICE COMPANY 1201 Hays Street

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

ACCOUNT NO. : 12000000195							
REFERENCE : 343302 7941640							
AUTHORIZATION: Typelli Class							
COST LIMIT : \$ 25.00							
ORDER DATE : January 10, 2023							
ORDER TIME : 1:43 PM							
ORDER NO. : 343302-078							
CUSTOMER NO: 7941640							
CHANGE OF AGENT							
NAME: PCH JV VENTURES #3, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker 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.

l.	Na	me of the limited liability company: PCH JV VENTU	RES #3	, LLC	
	(a)				
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	, 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		189 S. ORANGE AVENUE, SUITE 970		189 S. O	RANGE AVENUE, SUITE 970
		ORLANDO, FL 32801	_ 	ORLAND	90, FL 32801
		09/22/2020		L20000298	8851
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)				
	(4)	Registered Agent and Registered Office shown on the records of t	he Florida	a Dept. of Stat	te:
		CORPORATE CREATIONS NETWORK INC.			202: SEL
		Registered Office Address (MUST BE FLORIDA STREET A			
		801 US HWY 1			FIL 2023 JAN 111 SEURE ETALLAHA
		N PALM BEACH . FL	33408	•	Z3 JAN I I AM TALLAHASSEI
					9: 2: STAT
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	() (m)	14	- 23
		Enter name of New Registered Agent and/or New Registered	Onnce ao	aress:	, , ,
		Corporation Service Company			
		NEW Registered Office Address:			_
		1201 Hays Street			
					_
		Tallahassee, FL_	32301		
cha age wa the	inge ent w s/we artic	mited liability company is not organized under the law or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limiter R Green.	s of the registere bility co f the lim imited l	ed office an ompany, it i nited liabilit nability con	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
		ure of a member or authorized representative of a member		— Cie	Printed or typed name of signee
l h pro the to i not	visio obli nere ified	by accept the appointment as registered agent and agreed of all statutes relative to the proper and complete parties of my position as registered agent as provided by reflect a change in the registered office address. I have a first this change	performe for in C ereby co	ance of my Chapter 605 Onfirm that	acity. I further goree to comply with the