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	To: From:	Division of Corporations Fax Number : (850)617-6383 Account Name : REGISTERED AGE Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (855)330-1010		· • ·
	Email A	mail address for this business e report mailings. Enter only one e ddress: LLC REGISTERED AGENT PADRE PROPERTIES Certificate of Status Certified Copy Page Count Estimated Charge	CHANGE	for future se.**

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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.

I. Na	nme of the limited liability company: Padre Pro	ppe	ties, LL	С	
2. (a)		_ (b)		
	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)			illing address of limite (<u>Note: MAY BE POS</u>	· · ·
	2750 Florence Blvd.		14547 H	lenry Harrisor	n Stillwell Drive
	Florence AL 35630	_	Huntersvi	lle NC 28078	
	09/30/20		L20000	308118	
3.	Date of filing/registration in Florida	4.		Document number	
(,	ERBE, MICHAEL X Registered Agent and Registered Office shown on the records of th Registered Office Address (MI/ST BE FLORIDA STREET A 3000 HARGETT LANE				
	SAFETY HARBOR . FL	3469	5	14	202
SAFETY HARBOR FL 34695 (b) Northwest Registered Agent LLC				دری ۲. (۲. ۲. ۲. ۲. ۲. ۲. ۲. ۲. ۲. ۲. ۲. ۲. ۲. ۲	
Enter name of NEW Registered Agent and/or NEW Registered Office address:					1
	7901 4th St N				
	NEW Registered Office Address STE 300			<u>-</u>	2:45
	St. Petersburg	3370	2		

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

The second	Nat Smith		
Signature of a member or authorized representative of a member	Printed or typed name of signee		

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 antified in writing of this change.

Taylor Newman - Assistant Secretary

Signature of Registered Agent

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

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