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	(Requestor's Name)
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PICK-UP	WAIT MAIL
<del>_</del>	
<del></del>	(Business Entity Name)
	, ,
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Havs Street

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

ACCOUNT NO. : 12000000195	
REFERENCE : 097789 8281054	
AUTHORIZATION: Lypelbellerson	
COST LIMIT : \$ 25.00	
	-
ORDER DATE : October 30, 2023	
ORDER TIME : 1:45 PM	
ORDER NO. : 097789-060	
CUSTOMER NO: 8281054	
*	
CHANGE OF AGENT	
NAME: WALK ABOUT PROPERTIES LLC	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY	
XX PLAIN STAMPED COPY	

CONTACT PERSON: Alexxis Weiland-sorenson -- 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.

2. (a) (b)	1. Na	me of the limited liability company: WALK ABOU	T PROPE	RTIES, LLC	С
Principal office address of limited liability company:    Natility address of limited liability company:   Natility address of limited					
B75 N MICHIGAN AVE STE 2700  CHICAGO, IL 60611 UN  10/02/2020  Date of filing/registration in Florida  Document number  5. (a)  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  KNAPP, ELAINE  Registered Office Address  906 MAGDALENA RD  PALM BEACH GARDENS  PALM BEACH GARDENS  Corporation Service Company  NEW Registered Office Address:  1201 Hays Street  Tallahassee  FL  Tallahassee  FR  Tallahassee  FR	. ,	Principal office address of limited liability company:		, <del>-</del>	Mailing address of limited liability company:
10/02/2020   L20000312524				875 N M	
3. Date of filing/registration in Florida 4. Document number  5. (a)  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  KNAPP, ELAINE  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  906 MAGDALENA RD  PALM BEACH GARDENS  FL 33410  (b)  Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company  NEW Registered Office Address:  1201 Hays Street  Tallahassee  FL 32301  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after change or changes are made, the Florida street address of the registered office and the business office of the registere agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change of the authorized by an affirmative vote of the members of the limited liability company or as otherwise provided the articles of organization or the operating agreement of the limited liability company.  Isl Miles Mikolas.  Miles Mikolas, Owner Manager  Printed or typed name of signee		CHICAGO, IL 60611 UN	<del></del>	CHICAG	GO, IL 60611 UN
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Tallahassee		Corporation Service Company			32
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Though great the appointment of registered most and arms to get in this conveins. I forther growth wild	change agent w was/we the artic	or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cles of organization or the operating agreement of the	he register liability co s of the lin he limited	ed office ar ompany, it i nited liabili liability cor	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and ac the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has bee	Signat	ure of a member or authorized representative of a member			Printed or typed name of signee
notified in writing of this change.  GRACE E KIRBY, ASST. VICE PRESIDENT	I hereh provisie the obli to mere notified	ons of all statutes relative to the proper and complet gations of my position as registered agent as provid by reflect a change in the registered office address, in writing of this change.	te perform ded for in ( I hereby c	ance of my Chapter 60, onfirm that	duties, and I am familiar with and accepts, F.S. Or, if this document is being filed the limited liability company has been
Signature of Registered Agent		Chaco Cokuble	ORA	ICL L KIK	OT, ABIT VICE INCOMENT

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