Division of Corporations

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LLC REGISTERED AGENT CHANGE EIP MAIN GATE, LLC

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M. SOLOMON MAR 2-2 2024

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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.

L. No	ame of the limited liability company:EIP MAIN GAT	E. LLC	C				
2. (a)			(b)				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)				Mailing address of limited lie (Note: MAY BE POST O	ability compan	y:
	189 S Orange Avenue 1170	189 S Orange Avenue 1170					
	Orlando, FL 32801		0	rlando, i	FL 32801		
	11/13/2020		1.20)()(N)349	7779		
3.	Date of filing/registration in Florida	- 4.			Document number		·· ···································
5. (a)	JAMES MARVEL						
J. (a)	Registered Agent and Registered Office shown on the records of	the Flo	orida De _l	pt. of Sta	le:		
						: : ;	200
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)			ا در د	- X
	189 S Orange Avenue 1170					22.	MAR
	Orlando	3280) }		_		22 #
(b)	Corporate Creations Network Inc.					# STATE 2000/2012/	AH IO:
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				Į. Žiri	20	
	NEW Registered Office Address:			<u>.</u>	_		
	801 US Highway 1				_		
	North Palm Beach	3340	08		_		
change agent v was/we	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	regis ability of the	itered o y comp Timited	ffice an any, it i Hiabilit	nd the business office of is hereby confirmed that ty company or as otherw	the registere the change(ed s)
Qad	la Lopez		Jade Lo	pez. Atto	orney-in-Fact		
Signa	ture of I member or authorized representative of a member	-	_		Printed or typed name of si	gnee	
provisi the obl to mer	by accept the appointment as registered agent and agr ions 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 i d'in writing of this change.	perfo d för .	rmance in Chai	e of my oter 60:	duties, and Lam familia 5. F.SOr. if this docum	r with and a ent is being	ccept filed
Dan	Jade Lopez, Special Secretary						