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COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	RICH SQUARE PROJECT MANAGER, LL	С	
00-10-		mited	Liability Company
Dear S	ir or Madam;		
The en	closed Registered Agent/Registered Office Char	nge an	nd fee(s) are submitted for filing.
Please	return all correspondence concerning this matter	r to th	e following:
Kirk Ei	choltz		
	Name of Person		
Christia	an Tyler Properties, LLC		
	Firm/Company		
4211 W	Boy Scout Blvd Suite 150		
	Address		
Tampa,	Florida 33607		
	City/State and Zip Code		
KirkEid	choltz@ctp-fl.com		
13	-mail address: (to be used for future annual repo	rt no	tification)
For fur	ther information concerning this matter, please of	call:	
Kirk Ei	choltz 8	13	786-5381
	Name of Person		Area Code & Daytime Telephone Number
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
	Enclosed is a check for the following amoun	t:	
	□ \$25 Filing Fee	0	\$55 Filing Fee & Certified Copy

INHS18 (2/14)

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: RICH SQUARE P	ROJE	CT MANAGER	R, LLC			
2. (a)	4211 W Boy Scout Blvd Suite 150 (b) 4211 W Boy Scout Blvd Suite 150						
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of I		-	
	Tampa, Florida 33607		Tampa, Flo	orida 33607			
	11/18/2021	_	L210004974	09		· · · · · ·	
3.	Date of filing/registration in Florida	4.		Document num	ber	- 121	
5. (a)	PURCELL, MORRIS D, JR.						
J. (L)	Registered Agent and Registered Office shown on the records of the	ne Flori	da Dept. of State	- ::			
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	<u>55)</u>				
	1110 NORTH FLORIDA AVENUE SUITE 200		<u> </u>		1	~2	
	Tampa , FL	33602			ALLA	023 A	
(b)	PURCELL, MORRIS D, JR.				MAS	11 9N	
,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office :	address:	•	ALLAHASSEE, FUNHIDA	2023 AUG 14 PM 4:	L
	NEW Registered Office Address:			•		53	
	777 S Harbour Island Blvd Stc 320			-	ア		
	Tampa , FL	33602					
change agent v was/we the arti	imited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of idea of breakly and the operating agreement of the liabers.	egiste oility o the li imited	red office and company, it is mited liability	I the business of hereby confirm company or as pany.	ffice of t led that (otherwi	he regis the chan ise prov	tered ge(s)
/ /	turn of a plember or authorized representative of a member			Printed or typed n	•		
I here provisi the obl to mere notified	the accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	e to a perfori for in creby	ct in this capa nance of my d Chapter 605, confirm that to	city. I further a luties, and I am F.S. Or, if this he limited liabil	igree to familiar docume ity comp	comply with an ent is he pany has	with the ad accept ing filed s been
Signatu	re of Registered Ageny						

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