Florida Department of State sion of Comoration

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE DENTON ARBOR HILLS JV, LLC

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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.

1. N	same of the limited liability company:	DENTON AR	DENTON ARBOR HILLS JV, LLC		
2. (a)	12895 SW 132ND STREET	(b)	12895 SW 132ND STF	 REFT	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liab	Mailing address of limited liability company: (Note: MAY RE POST OFFICE BOX)	
	MIAMI, FL 33186		MIAMI, FL 3318		
		_			
	05/27/2022		L22000233728		
3.	Date of filing/registration in Florida	4.	Document number		
5. (a)	CORPORATION SERVICE CO	MPANY			
` `	Registered Agent and Registered Office shown on the records of		State:		
	1201 HAYS STREET				
	Registered Office Address (MUST BE FLORIDA STREET				
	TALLAHASSEE , F	L32301-252	5	2022	
(b)	Corporate Creations Network In	nc.		FIL 2022 JUN 15	
	Enter name of NEW Registered Agent and/or NEW Registere		_ _	. 15 F	
	801 US Highway 1		• 	LED LED LED	
	NEW Registered Office Address:		• : :	, i.0: 1,	
				0	
	North Palm Beach , Fi	L_ 33408			
If the li	mited liability company is not occaning and and a la				
agent w was/we	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 limited limited the authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ability company, it	and the business office of the it is hereby confirmed that the	registered	
	ure of sphembol or authorized representative of a member	Rachel Joseph, Attorney-in-Fact			
		<u> </u>	Printed or typed name of signe	e	
the obli to mere	by accept the appointment as registered agent and agroups of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ee to act in this ca performance of m d for in Chapter of hereby confirm tha	pacity. I further agree to co by duties, and I am familiar w 05, F.S. Or, if this document at the limited liability compar	mply with the ith and accept is being filed ty has been	
Rach	(al) occaph Rachel Joseph, Special Sec	cretary			
οrΩ:#ππ]	e or realization while				

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