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Office Use Only

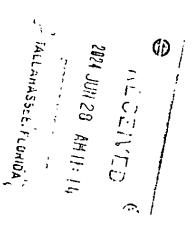


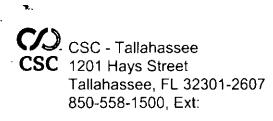
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SECRETARY OF STATE
TALLAHASSEE, FL





To: Department Of State, Division Of Corporations From: Amanda Miller - Amanda.Miller@cscglobal.com

Ext:

Date: 06/28/24 Order #: 1546469-1

Re: ORCSOUTHPORT LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Change of Registered Agent and Office

Check in the amount of: \$25:00 -FL State Account Number: I20000000195

Please take the following action:

File on a routine basis

Issue proof of filing

Return evidence to the following:

ATTN: Amanda Miller

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

ATEMENT 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:	JRT LLC	,
2.	(a)	2100 THIRD AVENUE NORTH	(b) 2100 THIRD AVENUE NORTH	
	(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		SUITE 600		SUITE 600
		BIRMINGHAM, AL 35203	_	BIRMINGHAM, AL 35203
		07/20/2023		L23000344083
3.		Date of filing/registration in Florida	 4.	Document number
5.	(a)	CT CORPORATION SYSTEM		
٥.	(4.)	Registered Agent and Registered Office shown on the records of	the Florida	la Dept. of State:
		1200 SOUTH PINE ISLAND		2021 SEC T
		Registered Office Address (MUST BE FLORIDA STREET	<u>ADDRESS</u>	SECRETATE TALLAND
		PLANTATION FI	33324	
	(b)	Enter name of NEW Registered Agent and/or NEW Registered	l Office ad	
		Enter fainte of NEW Registered Agent and/or NEW Registered	i Cilice au	uuress.
		Corporation Service Company		
		NEW Registered Office Address:		
		1201 Hays Street		
		Tallahassee , FI	32301	
ch: age wa	ange ent v is/wo	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 like authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registere ability co of the lim	red office and the business office of the registered ompany, it is hereby confirmed that the change(s) nited liability company or as otherwise provided in
		/S/ J. Travis Pritchett	J. T	Travis Pritchett, Manager
- 5	Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
pre the to	ovisi 2 obl mere	by accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I it in writing of this change.	verforma	iance of my duties, and I am familiar with and accept