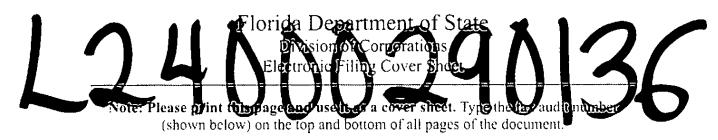
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Division of Corporations



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

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## LLC REGISTERED AGENT CHANGE WOODDALE INVESTMENTS LLC

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M. SOLOMON NOV 1 4 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.

1.	Νŧ	me of the limited liability company: Wooddale Invest	ments LLC			
2. (a)		4851 Tamiami Trail North, Suite 200, Naples, Fl. 34103  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) 4851 Tamiami Trail North, Suite 200, Naples, FL 34103  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
3.		06/28/2024  Date of filing/registration in Florida		00290136 Document number		
5	(a)	Wilson, George A				
5. (a)	(a)	Registered Agent and Registered Office shown on the records of	of State:			
		2425 Tamiami Trail North, Suite 200	er <b>2</b>			
		Registered Office Address (MUST BE FLORIDA STREET	2024 NOV 13			
		Naples , FI	34103	·		
(b)		C T Corporation System  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	PH 15			
		NEW Registered Office Address:		<del></del>		
		1200 South Pine Island Road	<del></del>			
		Plantation . FI	33324			
the ag	e cha ent v is/we	imited liability company is not organized under the lainge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members coles of organization or the operating agreement of the	f the registered lability compar of the limited l	office and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.		
-	Signature of a member or authorized representative of a member			Printed or typed name of signee		
pr th to	ovisi e obl merc	by accept the appointment as registered agent and agens on sof all statutes relative to the proper and complete igations of my position as registered agent as providedly reflect a change in the registered office address, I is mitting of this change.	e performance ed for in Chapt hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed a that the limited liability company has been		
Ву	•	T Corporation System CiWillin CA Assessment S				
Si	enatu	re of Registered Agent				