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PICK-UP	☐ WAIT	MAIL							
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(Document Number)									
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A BUTLER JUN 17 2022 CORPORATION SERVICE COMPANY

1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 676508 8331866

AUTHORIZATION : COST LIMIT : \$ 0.5 00

ORDER DATE : May 16, 2022

ORDER TIME : 9:28 AM

ORDER NO. : 676508-198

CUSTOMER NO: 8331866

## CHANGE OF AGENT

NAME: ICON KEYSTONE ICP I OWNER POOL 5 SOUTH FL, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland

EXAMINER'S INITIALS:

## 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	me of the limited liability company:	ICON KEYSTONE ICP I OWNER POOL 5 SOUTH FL, LLC						
2.		233 W. Wacker Drive, Suite 4700	•	(1	<i>-</i>				
2.	(a)	Principal office address of limited lia (Note: MUST BE STREET A		_ (	.,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Chicago, IL 60606		_					
		11/04/2003			мозооооо	3714			
3. 5	(2)	Date of filing/registration in C T Corporation System	Florida	4.	•	Document number	•		
5. (	(a)	Registered Agent and Registered Office show 1200 South Pine Island Road	vn on the records of t	he Florida	Dept. of Sta	:	SECR	2622 J	क्टा <u>रे</u> क्टी
		Registered Office Address (MUST BE F.	<u> </u>	LAHASSE	2022 JUN 16	merco 1			
		Plantation	, FL	33324		_	1955 1955	PM 1: 3	
(	(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company				_	근점	35	
		NEW Registered Office Address:				_			
		1201 Hays Street				_			
		Tallahassee	, FL	32301	_	_			
cha age was	nge nt w /we	mited liability company is not organic or changes are made, the Florida stre will be identical. Or, in the case of a F re authorized by an affirmative vote of cles of organization or the operating a	et address of the lorida limited lia of the members of	registero bility co f the lim	d office an mpany, it is ited liabilit	d the business office s hereby confirmed y company or as oth	e of the that the	register change	red :(s)
/s	/ Jil	l Cilmi		Jill (	Cilmi, Autho	orized Person			
Si	gnat	ure of a member or authorized representative	of a member			Printed or typed name	of signee		
I he pro the to n	ereb visio obli iere	y accept the appointment as registere ons of all statutes relative to the prope gations of my position as registered of ly reflect a change in the registered of Lin writing of this change.	ed agent and agre er and complete p egent as provided ffice address, I h	e to act performo for in C ereby co	in this cape ince of my d Thapter 605 Infirm that	acity. I further agre duties, and I am fan , F.S. Or, if this do the limited liability	e to con niliar wi cument compan	nply wi th and is being y has b	th the accept g filed een
noti	јјеа	Lin writing of this change.		•		•			
Sign	netur	e of Registered Agent	An	n M. C	asper, Assi	t. Vice President			