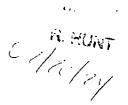


(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
, , ,
(Samuel Namba)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
opeolar instructions to 1 ming emeer.

Office Use Only





XORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT N	10. :	I20000000	195	
REFEREN	ICE :	312765	7482226	
AUTHORIZATI	ON :	Charles !	آ محتفظ	
COST LIM	IIT :	\$ 35:0	Wil.)
ORDER DATE : February 9, 2	024			. •
ORDER TIME : 10:57 AM				
ORDER NO. : 312765-113				
CUSTOMER NO: 7482226				
		• 		-,-'
CHANGE O				
NAME: PRP-GP LLC				
PLEASE RETURN THE FOLLOWING	AS PR	OOF OF FIL	ING ·	
		001 01 111		
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Shauna God	bolt			
	EXAMI	NER'S INIT	IALS:	

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.

l.	Na	me of the limited liability company: PRP-GP LLC	· · · · · ·				,. <u>.</u> ,
2.		101 East Kennedy Boulevard, Suite 2500		(b	3033 Ca	mpus Drive, Suite W400	
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(*		Mailing address of limited liabili (Note: MAY BE POST OFF)	
		Tampa, FL 33602	_ 		Plymouth	n, MN 55441-2651	
		11/14/2003			M0300000	03831	
3. 5. (a)		Date of filing/registration in Florida	4.			Document number	
	(a)	C T Corporation System				_	P= 3
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1200 South Pine Island Road				le:	pu di pri tu di
		Registered Office Address (MUST BE FLORIDA STREE	T ADDR	ESS		_	
		Registered Office Address MIDST BE TECHTOMENT MEE					
						_	• •
		Plantation	FL 333	324			
			L 1.7		-	-	<u> </u>
	a.s					.~ <u>.</u>	27
	(b) .	Enter name of NEW Registered Agent and/or NEW Register	-				
		Enter name of 1.15.1 Trees, 15.15.1					
		Corporation Service Company					
		NEW Registered Office Address:				-	
		1201 Hays Street					
					-	_	
		Tallahassee	_{FL} 3230	1		_	
cha age was	nge nt w /wei	mited liability company is not organized under the lor changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited reauthorized by an affirmative vote of the members of organization or the operating agreement of the second of the fill	he regist liability s of the ne limite	cor limi	d office and mpany, it is ted liability ability com	d the business office of the s hereby confirmed that the y company or as otherwise	registered change(s)
c:	anati	are of a member or authorized representative of a member	_			Printed or typed name of signee	
I he pro the	reb visio obligaere	accept the appointment as registered agent and a ons of all statutes relative to the proper and complet gations of my position as registered agent as provid by reflect a change in the registered office address, in writing of this change.	le perjoi led for i I hereby	mai n Ci coi	nce of my a hapter 605, ifirm that t	anita. I fauthou nomen to com	malu with the
•		en M Lev	•			• -	
Sign	iature	e of Registered Agent	AMI	IVI.	∪asper, A	Asst. Vice President	