M04000004256

(Red	questor's Name)	_
(Add	dress)	_
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(City	y/State/Zip/Phone #)	_
PICK-UP	WAIT MAIL	
(Bus	siness Entity Name)	-
(Doc	ocument Number)	
Certified Copies	Certificates of Status	
Special Instructions to Fili	ing Officer:	$\exists \mid$

Office Use Only



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22 MAR 25 AM 8: 2' TALLAHASSEE. FL

MAR 28 2022

LALBRITTON

HAR 25 PH 3: 4

CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 567597 8373137

AUTHORIZATION

COST LIMIT

ORDER DATE: March 23, 2022

ORDER TIME : 1:25 PM

ORDER NO. : 567597-066

CUSTOMER NO: 8373137

CHANGE OF AGENT

NAME: NORTHSTAR LAKESIDE, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

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. N	ame of the limited liability company: NORTHSTAR L	AKESI	DE, I	LLC					
2. (a)	1900 St. James Place		(b) 1900 St. James Place						
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)_		Mailing address o		-		
	Suite 300		5	Suite 300)				
	Houston, TX 77056	<u> </u>	 -	louston,	ouston, TX 77056				
	10/06/2004		M04000004256						
3.	Date of filing/registration in Florida	4.			Document nur	mber		-	
5. (a)	Registered Agent and Registered Office shown on the records of	the Flori	ida De	pt. of Stat	_ te:				
	C T CORPORATION SYSTEM								
	Registered Office Address (MUST BE FLORIDA STREET) 1200 SOUTH PINE ISLAND ROAD	ADDRE.	<u>(SS)</u>		_				
	PLANTATION FL	33324	ļ		_	<i>(.</i> '	2		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	gistered Office address:				ALLAHASSEE,	2022 MAR 25		
	Corporation Service Company			SEE SEE					
	NEW Registered Office Address: 1201 Hays Street	dress;			8: 29				
	Tallahassee, FL	32301			_				
change agent v was/w	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	registe ability of of the li	ered o comp mite	office and any, it is d liability	d the business of the business	office of the med that the	e regist te chan	tered ge(s)	
	Xie & Cone	Jil	l Cilr	ni, Autho	orized Person				
	ture of a member or authorized representative of a member				Printed or typed	_			
provisi the obl to meri	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations 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 ac perforn I for in tereby c	ct in nanc Cha confi	this cape e of my o pter 605 rm that i	acity. I further duties, and I an b. F.S. Or, if th the limited liab	agree to c n familiar v is documer ility compo	omply vith an ut is bei uny has	with the d accept ng filed been	
Signatu	re of Registered Agent	C	irace	E. Kirb	y, Asst. Vice P	resident			