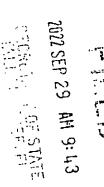
MD8000002554

| | (Requestor's Name) | | | |
|---|--------------------------|-----------------|--|--|
| | (Address) | | | |
| | (Address) | | | |
| | (Audress) | | | |
| | (City/State/Zip/Phone #) | · · | | |
| PICK-UP | WAIT | MAIL MAIL | | |
| | (Business Entity Name) | | | |
| | (Dashiess Linky Hame) | | | |
| | (Document Number) | | | |
| Certified Copies | Certificates of St | atus | | |
| Special Instructions to Filing Officer: | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |





300395060163



2022 SEP 29 AH II: 39

A. BUTLER SEP 3 0 2022 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : I2000000195 | | | | |
|---|--|--|--|--|
| REFERENCE : 965064 8387948 | | | | |
| AUTHORIZATION: Spulle man | | | | |
| COST LIMIT : \$ 25.00 | | | | |
| ORDER DATE : September 21, 2022 | | | | |
| ORDER TIME: 8:49 AM | | | | |
| ORDER NO. : 965064-123 | | | | |
| CUSTOMER NO: 8387948 | | | | |
| | | | | |
| CHANGE OF AGENT | | | | |
| | | | | |
| NAME: GORDON BROTHERS GROUP, LLC | | | | |
| NAME: GORDON BROTHERS GROUP, 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 | Name of the limited liability company: GORDON BROT | HERS GROUP, L | LC | |
|----------------------------|---|--|---|--|
| 2. (a) | Prudential Tower, 800 Boylston Street | Prudential Tower, 800 Boylston Street | | |
| (| Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | |
| | 27th Floor | 27th Floo | or | |
| | BOSTON, MA 02199 | BOSTO | N, MA 02199 | |
| | 05/30/2008 | M0800000 | 02554 | |
| 3. | Date of filing/registration in Florida | 4. | Document number 2 | |
| 5. (a | C T CORPORATION SYSTEM | | Document number 7072 SEP | |
| J. (a | Registered Agent and Registered Office shown on the records of the 1200 SOUTH PINE ISLAND ROAD | he Florida Dept. of Sta | 20 Hearth | |
| Registered Office Address | | DDRESS) | OF STATE | |
| | PLANTATION . FL | 33324 | - TA 5 | |
| | Corporation Service Company NEW Registered Office Address: 1201 Hays Street | | _ | |
| | | 22201 | _ | |
| | FL_ | 32301 ————— | _ | |
| chang agent was/w | limited liability company is not organized under the law go or changes are made, the Florida street address of the rwill be identical. Or, in the case of a Florida limited liab were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the limited liability. | registered office ar bility company, it i f the limited liabili | nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in | |
| | /S/ Jill Cilmi | | Jill Cilmi, Authorized Representative | |
| Sign | ature of a member or authorized representative of a member | - | Printed or typed name of signee | |
| provis the ob to met | eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address, I have a fix which the provided of this change. | ve to act in this cap performance of my for in Chapter 60, ereby confirm that | acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been | |
| Signat Grace | ure of Registered Agent e E. Kirby, Asst. Vice President | | | |

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00