9 11/05/2024 8:26 AM

Division of Corporations

Florida Department of State Divisional Comerations

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LLC REGISTERED AGENT CHANGE KRG KISSIMMEE PLEASANT HILL, LLC

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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. Na	ame of the limited liability company: KRG Kissimmee P	leasa	nt Hill, LL	С		
2. (a)	30 South Meridian Street		(b) 30 South Meridian Street			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	<u> </u>	•	s of limited liability compa Y BE POST OFFICE BOX	-
	Ste 1100		Ste 11	00		
	Indianapolis, IN 46204	_	Indiar	napolis, IN 46204		
	02/17/2010		M1000	0000752		
3.	Date of filing/registration in Florida	4.		Document r	number	
5. (a)	C T CORPORATION SYSTEM					
v. (u)	Registered Agent and Registered Office shown on the records of the	he Flor	rida Dept. o	f State:		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRE	<u></u>	~		
	1200 SOUTH PINE ISLAND ROAD					
	PLANTATION , FL	33324				
(b)	United Agent Group Inc.	· -			2824 NOV SECRET	ינ
, ,	Enter name of NEW Registered Agent and/or NEW Registered G	Office	address:			7 7 7 7 8
	801 US Highway I				-5 PM	E S
	NEW Registered Office Address:				11:21 71 (88)	•
	North Palm Beach , FL	33408		· · · · · · · · · · · · · · · · · · ·	•	
change agent v was/wo	imited liability company is not organized under the laws or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egist pility the l	ered offic company. imited lia	e and the busines , it is hereby con bility company o	ss office of the registe firmed that the change	red e(s)
Add	ia Myles	A	dia Myles,	Attorney-in-Fact		
	ture of member or authorized representative of a member	_		Printed or typ	oed name of signee	
provisi the obl to mere notified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I had I in writing of this change.	erfor	mance of	my duties, and I	am familiar with and	accept
Ada	a Mulaa Adia Myles Special Secretary					

Signature of Resistered Agent