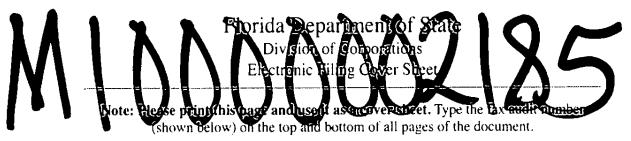
Division of Corporations



(((H24000368306 3)))



H240003683063ABC%

**Note:** DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email	Address:				<u> </u>	
-------	----------	--	--	--	----------	--

## LLC REGISTERED AGENT CHANGE KRG PORT ST. LUCIE SQUARE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Μ.	SOLOMOI	٧
----	---------	---

NOV - 5 2024

Electronic Filing Menu Corporate Filing Menu

Help

## 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: KRG Port St. I.	Lucie Square	, LLC			
2. (a)	30 South Meridian Street		(b) 30 South Meridian Street  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
4- (a)						
	Ste 1100		Ste 1100			
	Indianapolis, IN 46204		Indianapolis, IN 46204 M10000002185			
	05/13/2010					
3.	Date of filing/registration in Florida	4,		Document number		
5. (a)	C T CORPORATION SYSTEM					
J. 14.	Registered Agent and Registered Office shown on the records	of the Florida	a Dept. of State	:		
				207		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			2024 NOV		
	1200 SOUTH PINE ISLAND ROAD					
	PLANTATION	FL_33324		-5 PR M		
(b)	United Agent Group Inc.			H 2: 38		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			38 1E		
	801 US Highway 1					
	NEW Registered Office Address:					
	North Palm Beach , FI					
change agent was/w	limited liability company is not organized under the e or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member ticles of organization or the operating agreement of the street in the control of the street in the street in the control of the street in the street i	the registere Hiability cors of the lim	ed office and impany, it is sited liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
Adia Myles Signature of Thember or authorized representative of a member			i Myles, Αιτο	mey-in-Fact		
Sign	ature of Thember or authorized representative of a member			Printed or typed name of signee		
provis the ob to mer	by accept the appointment as registered agent and a sions of all statutes relative to the proper and comple ligations of my position as registered agent as provicely reflect a change in the registered office address, and in writing of this change.	igree to act de performe ded for in C I hereby co	in this capa ance of my d Chapter 605, onfirm that t	city. I further agree to comply with the luties, and I am Jamiliar with and accept F.S. Or, if this document is being filed he limited liability company has been		

Adia Myles, Special Secretary