6/9/22, 11:50 AM

To:

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220002015153)))



H220002015153ABCS

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 : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

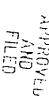
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_____

LLC REGISTERED AGENT CHANGE KRG TEMPLE TERRACE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55,00

22 JUN - 9 PM 4: 52



Electronic Filing Menu

Corporate Filing Menu

Help

JUN 1 0 2022

To:

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 TEMPLE T	ERRACI	E, LLC	
2. (a)	2021 Spring Rd Ste 200		2021	Spring Rd Ste 200
4. (a)	Principal office address of limited liability company: (Note: MUST RE STREET ADDRESS)	\.	~/ <u></u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE ROX)
	Oak Brook, IL 60523-1845	_	Oak B	Brook, IL 60523-1845
	06/22/2010	_	M1000	0002785
3. 5. (a)	Date of filing/registration in Florida CORPORATION SERVICE COMPANY	4.		Document number
•	Registered Agent and Registered Office shown on the records of t	the Florid	a Dept of	f State:
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRES.</u>	<u>sī</u>	20
	TALLAHASSEE, FL	32301-2	2525	2022 JUN
(b) .	C I Corporation System			FILL PR
	Enter name of NEW Registered Agent and/or NEW Registered	Office at	ldress:	PM 4: 5
	NEW Registered Office Address:			2
	1200 South Pine Island Road			·
	Plantation, F1.	33324		
the cha agent v was we	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regi ability co of the lin	istered c ompany nited lia	office and the business office of the registered it is hereby confirmed that the change(s) ability company or as otherwise provided in
/s/	/s/ Ann Hult Ar		Ann Hult, Vice President & Corporate Secretary	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obi to mer	hy accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I i d in writing of this change. 4s/ Sandra Zwijack - Asst. Secretary	ree to ac perforn d for in hereby c	t in this tance of Chapter confirm	capacity. I further agree to comply with the I my duties, and I am familiar with and accept of 605, F.S. Or, if this document is being filed that the limited liability company has been
	ue of Registered Agent			