M10000005586

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



500395058265

TALLAHASSES FL

RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

CERTIFIED COPY
XX PLAIN STAMPED COPY

Phone: 850-558-1500

	ACCOUNT NO.	:	12000000	0195			
	REFERENCE	:	116891	7143029			
	AUTHORIZATION	:	J.X				
	COST LIMIT	:	\$ 135.00	Class			
ORDER DATE :	November 7, 2022						
ORDER TIME :	1:19 PM						
ORDER NO. :	116891-091						
CUSTOMER NO:	7143029						
CHANGE OF AGENT							
NAME: DUKE SAMPLE 2,3 & PCB 12 MEMBER, LLC							
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FI	LING:			

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.

ł. Na	une of the limited liability company:	E 2,3 & PC	B 12 MEM	MBER, LLC			
	1800 Wazoo Street, Suite 500	(b)					
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Ŋ	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Denver, CO 80202						
	12/16/2010	N	110000005	5586			
3.	Date of filing/registration in Florida	4.		Document number			
5 (0)	C T Corporation System						
5. (a)	Registered Agent and Registered Office shown on the records of	f the Florida I	Ocpt. of State	- ::			
	1200 South Pine Island Road			(202		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		ALLA	2022 NOV 15		
	Plantation, F	33324 L_			VIS PMI	Jei	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company	d Office adda	' <u>ess</u> :	 - F	PM 12: 11	-	
	NEW Registered Office Address:						
	1201 Hays Street						
	Tallahassee, FI	L					
change agent w was/we	mited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registered iability com of the limit	office and pany, it is ed liability	the business office of hereby confirmed that company or as othery	the register t the change	-ed -(s)	
	ichael T. Blair			, Authorized Person			
Signat	ure of a member or authorized representative of a member	-		Printed or typed name of s	ignee		
provision the oblition	oy accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I	r perjorman ed for in Ch hereby con	ce oj my a apter 605, firm that ti	thies, and Fam Jantic F.S. Or, if this docum he limited liability con	o comply wi ir with and i rent is being rpany has b	th the accept g filed een	
notified	un writing of this change.	Corporatio	n Service	Company			
Signatur	e of Registered Agent	Ami M. Ca	sper, Ass	t. Vice President			