7/17/2020

Division of Corporations

## Florida Department of

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

\*\*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 LANCOR PARKING, L.L.C.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

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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 submus the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company; LANCOR PARK	ING, L	lC					
2. (:				(b)					
•		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
		233 Peachtree Street NE, Harris Tower - Suite 2600	_		233 Peach	itree Street NE, Harris Tow	eı – Sui	te 2600	
		Atlanta, GA 30303			Atlanta, G	GA 30303			
		12/27/2010		,	410000005	5735			
3.		Date of filing/registration in Florida	4.			Document number			
5. (	(a)	Registered Agent and Registered Office shown on the records of				<del>_</del>			
		Registered Agent and Registered Office shown on the records of NRAI SERVICES, INC	the Fiori	ida 1	Dept. of Stat	ite.			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
		1200 South Pine Island Road				아 크린 	2020 JUL 17		
		Plantation , FL	33324						
,	ს)	C.T. Corporation System				HASSEI HASSEI	17		
`	σ,	Enter name of NEW Registered Agent and/or NEW Registered Office address				SEC FL	AM 9: 25 OF STATE SEE, FL		
		NEW Registered Office Address:							
		1200 South Pine Island Road				_			
		Plamation, F1.	33324		_	_			
the ager was the	cha it v /wo arti	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the H. Miller	the reability of the limite	gist cot imi d li	tered offic inpany, it i ted liabilit ability cor	ce and the business office is hereby confirmed that ity company or as otherwinpany.  Authorized Person	e of the the chi	registered mgc(s)	
		ture of a member or authorized representative of a member				Ponted or typed name of si			
By: j	ieni	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete igations of my position as registered agent as provide Iv reflect a change in the relistered office address, I I in writing of this change. C T Corporation System hiter Kurz, Asst Secretary to of Registered Agent	ree to a perfor ed for n hereby	uct ma n C r co	in this cap ince of my hapter 60, nfirm that	pacity. I further agree to duiles, and Lam familia 15, F.S. Or, if this docum t the limited liability con	compler with a ent is h pany h	y with the and accept peing filed as heen	
		Division of Corporations P.O.	Box 63	27	• Tallaha	assee, FL 32314			

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