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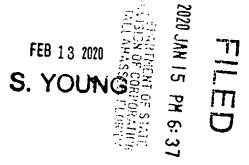
| stor's Name) | |
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Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: January 14, 2020

Order#: 137731-076

Re: FIRSTVIEW, LLC

Enclosed please find:

XX _ Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.

| 2. (a | 2000 RIVEREDGE PARKWAY, #580 | (b) | (b) 2000 RIVEREDGE PARKWAY, #580 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | |
|----------------------------------|---|---|--|---|--------------------------------------|
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | | |
| | ATLANTA, GA 30328 | | ATLANTA, GA 30328 | | |
| | 08/23/2011 | | M11000004256 | | |
| 3. | Date of filing/registration in Florida | 4. | Document nur | nber | |
| 5. (a | a) C T CORPORATION SYSTEM | | | | |
| <i>D.</i> (. | Registered Agent and Registered Office shown on the records | of the Florida | Dept. of State: | | |
| | 1200 SOUTH PINE ISLAND ROAD | | | | |
| | Registered Office Address (MUST BE FLORIDA STREE | | | | |
| | | | | 2020 JAN 15 | |
| | | | | | 77 |
| | PLANTATION , | FL 33324 | | ***** * | 130 |
| | | | | 288 158 158 158 158 158 158 | 277 |
| (b) | Corporation Service Company | | | F OF EE, TO | Ш |
| | Enter name of NEW Registered Agent and/or NEW Registered Office address: | | | | |
| | | | | 6: 3 STATE LINEST | |
| | 1201 Hays Street | | | | |
| | <u>NEW</u> Registered Office Address: | | | | |
| | | | | | |
| | Tallahassee | FL_32301 | | | |
| the c agen was/ the a | limited liability company is not organized under the hange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the member rticles of organization or the operating agreement of t | of the regist I liability corrs of the limi | ered office and the busing npany, it is hereby confir ted liability company or a | ess office of the reg med that the change | gistered e(s) |
| | nature of a member of authorized representative of a member | Jill C | ilmi, Authorized Person | | |
| Sig | nature of a member or authorized representative of a member | - | Printed or typed | name of signee | |
| provi the o to me notif | reby accept the appointment as registered agent and a isions of all statutes relative to the proper and comple bligations of my position as registered agent as provi erely reflect a change in the registered office address, ted in writing of this change. | ete performa ided for in C. . I hereby co | in this capacity. I further nce of my duties, and I an hapter 605, F.S. Or, if th nfirm that the limited liab | agree to comply w n familiar with and is document is bein pility company has l | ith the accept g filed been |
| | Moce C.Kuby Hure of Registered Agent Corporation Service Company | | | | |
| Signa | nure of Registered Agent Corporation Service Company | y BY: Gr | ace E. Kirby, Asst. Vice | e President | |