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| (Requestor's Name) | | | | | | |
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| PICK-UP WAIT MAIL | | | | | | |
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| (Business Entity Name) | | | | | | |
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| Certified Copies Certificates of Status | | | | | | |
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| Special Instructions to Filing Officer: | | | | | | |
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Office Use Only



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2021 The Amore

Y SULKER NOV 05 2021 CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : I2000000195 | | | | | | | |
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| | | | | | | | |
| REFERENCE : 15684.9) 4328604 | | | | | | | |
| AUTHORIZATION : THE TOTAL CONTROL OF THE TOTAL CONT | | | | | | | |
| COST LIMIT : \$ 25.00 | | | | | | | |
| ORDER DATE : October 22, 2021 | | | | | | | |
| | | | | | | | |
| ORDER TIME: 4:01 PM | | | | | | | |
| ORDER NO. : 156849-017 | | | | | | | |
| CUSTOMER NO: 4328604 | | | | | | | |
| | | | | | | | |
| CHANGE OF AGENT | | | | | | | |
| | | | | | | | |
| NAME: COLE BJ PORTFOLIO I, LLC | | | | | | | |
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| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: | | | | | | | |
| CERTIFIED COPY | | | | | | | |
| XX PLAIN STAMPED COPY | | | | | | | |
| | | | | | | | |
| 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.

| 1. N | lame of the limited liability company: COLE BJ POR | TFOLIC |) , | LLC | |
|----------------------------|--|---|----------------------------|---|---|
| 2. (a) | 2325 E. Camelback Road | | (b) | 2325 E. | Camelback Road |
| . (, | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | (0) | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) |
| | 9th Floor | | | 9th Floo | r |
| | Phoenix, AZ 85016 | | , | Phoenix | , AZ 85016 |
| | 09/27/2011 | | N | 1110000 | 04863 |
| 3. | Date of filing/registration in Florida | 4. | | · <u>-</u> - | Document number |
| 5. (a) | CT CORPORATION SYSTEM | | | | |
| • | Registered Agent and Registered Office shown on the records of 1200 S PINE ISLAND RD | the Flori | ida I | Pept, of St | nte: |
| | Registered Office Address (MUST BE FLORIDA STREET | ADDRE. | <u>SS)</u> | | _ |
| | | | | | ~7 |
| | PLANTATION | 33324 | | | THE AMID: 11 THE AMID: 11 THE AMIASSEE, FL |
| (b) | | | | · | - 1 |
| | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> | l Office a | <u>ıddr</u> | ess: | |
| | Corporation Service Company | | | | E E E |
| | NEW Registered Office Address: | | | | · 🙃 — |
| | 1201 Hays Street | | | | |
| | Tallahassee FL | 32301 | _ | | - |
| cnange agent v was/w | imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the | registe: ability c of the lin | red omp mite | office ar pany, it i ed liabili | nd the business office of the registered is hereby confirmed that the change(s) |
| Jill Cilmi, Autho | | | | | orized Person |
| | ture of a member or authorized representative of a member | | | | Printed or typed name of signee |
| he obl | by accept the appointment as registered agent and agrous of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is mitting of this change. | ee to ac perforn I for in iereby c | t in tanc Cha onf | this cap te of my upter 602 irm that | acity. I further agree to comply with the duties, and I am familiar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been |
| Sionani | Drace Z-Kuby re of Registered Agent | | | | |
| Grace | E. Kirby, Asst. Vice President | | | | |

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00