## <u>412000002388</u>

(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:							
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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street

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

ACCOUNT NO. : 12000000195						
REFERENCE : 466421 8369821						
AUTHORIZATION: Spullelena						
COST LIMIT : \$ 25.00						
ORDER DATE : February 9, 2022						
ORDER TIME : 4:46 PM						
ORDER NO. : 466421-014						
CUSTOMER NO: 8369821						
CHANGE OF AGENT						
NAME: BUREAUS INVESTMENT GROUP PORTFOLIO NO. 2 LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY						
CONTACT PERSON: Alexxis Weiland						
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.	Na	me of the limited liability company:	IVESTMEN	<u></u>	IT GROUP PORTFOLIO NO. 2 LLC		
2.	(a)		(i	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)		
		650 Dundee Road, Suite 370			650 Dundee Road, Suite 370		
		Northbrook, IL 60062	<del></del>	•	Northbrook, IL 60062		
		04/30/2012		١	M12000002388		
3.		Date of filing/registration in Florida	4.	_	Document number		
5.	(a)						
٥.	Registered Agent and Registered Office shown on the records of the I			Florida Dept. of State:			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<u> </u>		
		17888 67TH COURT NORTH			DRESS) 222		
		LOXAHATCHEE	FL_33470		<u> </u>		
	(b)						
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			ldress:		
		Corporation Service Company					
	NEW Registered Office Address: 1201 Hays Street			_	<del></del>		
		Tallahassee	FL_32301				
ch ag wa	ange ent v as/we e arti		laws of the he register liability co s of the lim he limited b	ed om nit lia	ompany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in		
Signature of a member or authorized representative of a member					Printed or typed name of signee		
I i pro the to	herek ovisi e obli mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple	Te perform ded for in ( I hereby co	ar Ch on	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept hapter 605, F.S. Or, if this document is being filed on firm that the limited liability company has been		
Si	gnatu	re of Registered Agent	UKACE I	Ľ.	E. KIRBY, ASST. VICE PRESIDENT		