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## LLC REGISTERED AGENT CHANGE INTERCHANGE PRIMERA COURT II, LLC

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P. West

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7/22/20, 1:44 PM

## 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	ame of the limited liability company: INTERCHANGE P			COUR	TII, LLC
2. (a)	444 SEABREEZE BOULEVARD, SUI	TE 1000	(b)	444 SE	ABREEZE BOULEVARD, SUITE 1000
(-)	Principal office address of limited lia (Note: MUST BE STREET A  C/O CHARLES WAYNE PROPERTI	ODRESS)	_ (0)		Mailing address of limited liability company:  (Note: MAY RE POST OFFICE BOX)  ARLES WAYNE PROPERTIES, INC.
	DAYTONA BEACH, FL 32118		- ·	DAYTO	NA BEACH, FL 32118
	06/07/2012		N	11200000	3225
3. 5. (a)	Date of filing/registration in CT CORPORATION SYSTEM	Florida	4.		Document number
J. (2)	Registered Agent and Registered Office show	n on the records of the	Florida U	Pept. of St	ate:
	Registered Office Address (MUST BE FI	ORIDA STREET AD	DRESS)		22
	PLANTATION	, FL <sup>3</sup>	33324		<u>-</u> 
(D)	Corporate Creations Network Inc.				22
	Enter name of NEW Registered Agent and/o	r NEW Registered O	ffice addr	ess:	7
	801 US Highway 1				
	NEW Registered Office Address:	- <del> </del>	<del></del>		3
	North Palm Beach	, FL_33	3408		
hange gent w vas/we	or changes are made, the Florida stree ill be identical. Or, in the case of a Fl	ed under the laws t address of the re orida limited liabi f the members of t	of the St gistered lity comp he limite nited liab	office and pany, it is defined the second in	orida, it is hereby confirmed that after the d the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
Signati	are of a member of authorized representative o	f a member			Printed or typed name of signee
l hereb rovisio he obli o mere otified	y accept the appointment as registered ons of all statutes relative to the prope gations of my position as registered a ly reflect a change in the registered of in writing of this change.	d agent and agree r and complete per gent as provided fo fice address, I her	to act in rformand or in Cho eby conf	this cap se of my upter 603 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
		man, Special Secreta			

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