7/26/23, 12:51 PM

Division of Corporations



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## LLC REGISTERED AGENT CHANGE INTRINSIC HOLDINGS, LLC

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K. Brumbtey

## 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.

i. N	ame of the limited liability company:	LDINGS, LLC		
2. (a)	180 N. LaSalle Street	(b) 180 N. LaSalle Street		
(-,	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)	
	Suite 1800	Suite 180	90	
	Chicago, IL 60601	Chicago,	IL 60601	
	4/25/2013	M1300000	02621	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	COE. MARK D			
J. (a,	Registered Agent and Registered Office shown on the records of	the Florida Dept. of Su	ate:	
	Registered Office Address (MUST BE FLORIDA STREET) 6832 FISHER ISLAND DRIVE	ADDRESS)	_	
	Fisher Island , FI	33109	2023	
(b)	C T Corporation System		APPRU AN FIL 26 SECRETAL VALLAMESS	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	APPROVED AND FILED  FILE ANTI: 2: ALL 26 ANTI: 2: ALL 36 STATE STATE ALL 38 SEEL FLOOR	
	NEW Registered Office Address:		- 8E <b>:</b>	
	1200 South Pine Island Road		- · · · · <b>(3)</b>	
	Plantation , FL	33324	_	
the cha agent v was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie cre authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registered office ability company, it of the limited liability	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.	
Signa	ture of a member or authorized representative of a member	<del></del>	Printed or typed name of signee	
provis the ob to mer notifie By:	<u> </u>	ree to act in this cap performance of my d for in Chapter 60 hereby confirm that stine Kelm, Assista	duties, and I am familiar with and accept 15, F.S. Or, if this document is being filed the limited liability company has been	
Signatu	ire of Registered Agent			

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