MBCCCCO7897

(Requestor's Name)				
(Address)				
(Address)				
,				
(City/State/Zip/Phone #)				
(Oity/State/Zip/Entone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallnassee, FL 3230 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000	0195
	REFERENCE	:	609283	8295390
	AUTHORIZATION	:		15.13.
	COST LIMIT	:	\$ 25.00	Chair Letter
				$0 \bigcirc$
ORDER DATE :	August 28, 2024			
ORDER TIME :	2:27 PM			
ORDER NO. :	609283-080			
CUSTOMER NO:	8295390			
	CHANGE OF A	GENT	<u>,</u>	
NAME:	INVENTRUST PROMANAGEMENT, L		C.T. A.	

CONTACT	PERSON:	Amanda	Miller		
			EXAMINER'S	INITIALS:	

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

STATEMEN'T 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. Na	nme of the limited liability company: INVENTRUST	PROPER	RTY MA	NAGEMENT, LLC		
2. (a)	3025 Highland Parkway Suite 350	(1	3025 Highland Parkway Suite 350			
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Downers Grove, IL 60515		Down	ners Grove, IL 60515		
	12/13/2013	_	M130	00007897		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	Registered Agent and Registered Office shown on the records o C T CORPORATION SYSTEM Registered Office Address (MUST BE FLORIDA STREET) 1200 SOUTH PINE ISLAND ROAD PLANTATION	f the Florida		PLE 124 SEP -5 SECRETALAN TALLAHAS		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company	_ d Office ad	ldress:	PH 12: 28 SEE. FL		
	NEW Registered Office Address:					
	1201 Hays Street					
	Tallahassee, Fi	L_32301				
change agent v was/we	imited liability company is not organized under the la or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e registere iability co of the lim	ed offic ompany. nited lia	te and the business office of the registered to it is hereby confirmed that the change(s) subility company or as otherwise provided in		
	/ Christy L. David	Chr	isty L. [David, Authorized Person		
-	ture of a member or authorized representative of a member			Printed or typed name of signee		
provisi he obl to mere	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address. I I in writing of this change.	: perform	ance of	my duties, and I am familiar with and accept		
<u>X)</u> Signatur	oce C-Kubl GRACE E. KIRBY, ASST VI	CE PRES	SIDENT	Γ		