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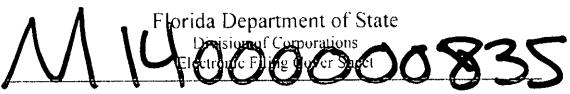
2021-12-09 12:18:00 CST

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From: Lexus Wingo

12/9/21, 1:15 PM

Division of Corporations



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## LLC REGISTERED AGENT CHANGE AMERICAN MANAGEMENT SERVICES CENTRAL LLC

Certificate of Status	0
Certified Copy	1
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C. BRUMBLEY
DEC 10 2021

3

## 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. No	nme of the limited liability company: American Manag	gement S	Services Cent	ral LLC				
2. (a)			(b)					
~. (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)					
	5055 Keller Springs Rd, Suite 400		225 W. Wacker Drive, Suite 3000					
	Addison, TX 75001	_	Chicago, IL 60606					
	02/05/2014	00835	835					
3.	Date of filing/registration in Florida	4.		Document num	ber	-		
5 (a)	CORPORATION SERVICE COMPANY							
5. (a)	Registered Agent and Registered Office shown on the records of	ate.						
	Registered Office Address (MUST BE FLORIDA STREET) 1201 HAYS STREET	<u>SS)</u>	<del></del>	्र इन्हें	202			
	TALLAHASSEE, FI	J 32301				2021 DEC	7	
(b)	C T Corporation System		MSEE.	-9				
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :			_		AH 8: 1	ED	
	NEW Registered Office Address:			_	•	0	.50	
	1200 South Pine Island Road			<del></del>			9	
	Plantation, FI	33324 L						
the cha agent was/w	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the re iability of the l	gistered offi company, it imited liabil	ice and the busine t is hereby confirn lity company or as	ess office of ned that the	the reg change	istered (s)	
	s/ Jessie Waller		ssie Waller, S					
Signa	iture of a member or authorized representative of a member			Printed or typed n	ume of signe	e ·		
provis the ob- to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I d in writing of this change.  C.T. Corporation System of the Hoden, Asst Sect	gree to c e perfoi led for i hereby	ict in this co mance of m n Chapter 6 confirm the	spacity. I further ny duties, and I am 105, F.S. Or, if thi nt the limited liubi	agree to co i familiar w is document ility compa	mply wi ath and t is bein ny has t	ith the accept g filed peen	
Signati	ire of Registered Agent							