M1400000 7217

(Requestor's Name)								
(Address)								
(Address)								
(City/State/Zip/Phone #)								
PICK-UP WAIT MAIL								
(Business Entity Name)								
(Document Number)								
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: February 13, 2020

Order#: 171284-187

Re: BH SP MANAGER, L.L.C.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX ____ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Erika Zavala Daza

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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. 8	Name of the limited liability company: BH SP MANAG	ER, L.L.C	<u> </u>				
2. (a	400 LOCUST STREET	(b)	400 LO	CUST STREET			
2. (u	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)		failing address of limited (Note: MAY BE POS			-
	SUITE 790	_	SUITE 79	0			
	DES MOINES, IA 50309	_	DES MOI	NES, IA 50309			
	10/06/2014		M1400000)7217			
3.	Date of filing/registration in Florida	4.		Document number			
5. (a	,		N				
	Registered Agent and Registered Office shown on the records of t	ihe Florida i	Jept, of State	:			
	155 OFFICE PLAZA Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)					
	SUITE A						
	TALLAHASSEE	32301				~	
(b	,	06				2020 FEB	-
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	ress:				,
	1201 Hays Street					AH	ř.
	NEW Registered Office Address:					.;. I	الريب با
				1		: 38	
					٠;	ω.	
	Tallahassee . FL	32301					
the cl agent was/v the ar	limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liavere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the regist ability cor of the limi limited li	ered office mpany, it is ted liability ability com	and the business of hereby confirmed to company or as other pany.	ffice o that the	f the re e chang	gistered ge(s)
Sign	nature of a member or authorized representative of a member	JIII C	ilmi, Author	rized Person Printed or typed name of	of signe	e	
I her provi the or to me	reby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I he ed in writing of this change.	ree to act performa d for in C hereby co.	in this capa nce of my a hapter 605, nfirm that t	icity - I further agre	re to co	mnlv v	vith the d accept ng filed been
Signa	ture of Registered Agent Corporation Service Company	BY: Gr	ace E. Kir	bv. Asst. Vice Pre	sident	t	