Division of Corporations 3/10/2021 Note: Please print this page and use it as a cover sheet. Spethe (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

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Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 : (954)208-0845 Fax Number

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LLC REGISTERED AGENT CHANGE IWG-TLA MEDIA, LLC

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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. Na	nme of the limited liability company: [IWG-TLA Media,	LLC		· · · · · · · · · · · · · · · · · · ·			
2. (a)			bì				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		N	failing address of limited (Note: MAY BE POST			
	1199 N Fairfax St. STE 700	1199 N Fairfax St. STE 700					
	Alexandria, VA 22314	Alexandria, VA 22314					
	11/07/2014		M140090081	124			
3.	Date of filing/registration in Florida	4.		Document number			
5 (w)	COGENCY GLOBAL INC.						
5. (a)	Registered Agent and Registered Office shown on the records of the	ne Flori	da Dept of State).			
	Registered Office Address					2021 MAR 1.0	
	115 NORTH CALHOUN STREET SUITE 4						
	TALLAHASSEE , EL	32301	. <u></u>	-	19 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	01	;
.1	C T Corporation System				- 150 - 150 - 150	7	
(b)	Enter name of NEW Registered Agent and/or NEW Registered	Office s	iddress:	-	5m		
	NEW Registered Office Address:						
	1200 South Pine Island Road			-			
	Plantation F1.	33324		_			
the ch agent	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liewere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	vs of the republication of the land the	ne State of Flogistered office company, it is imited liability con	orida, it is hereby core and the business of shereby confirmed ty company or as other apany.	hat the cl	iange(s)
	Is/ Christine Brennan authorized representative of a member		Histine Brenna	n, Assistant Secretary Printed or typed name of	of signee		
I her provi the of to me notifi By	white of a member of authorized representative of a member of authorized representative of a member and agree sions of all statutes relative to the proper and complete or ignations of my position as registered agent as provide rely reflect a change in the registered office address. If of in writing of this change. CT Corporation System [13] Michele Holden, Asst Sect https://www.nimedia.com/	ree to a perfor d for it hereby	ict in this cap mance of my a Chapter 60, confirm that	anim Lingthur mare	a ta cami	oly with and ac heing f has hee	the ecept filed m

To: 18506176383