

M15 000003 do3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

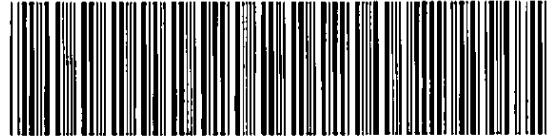
(Document Number)

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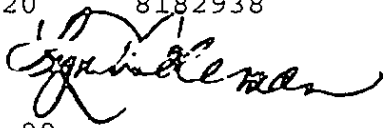
RECEIVED  
2023 MAR 23 AM 10:14  
FALL RIVER, FL  
F-11 D

RECEIVED  
2023 MAR 23 PM 3:26  
DIRECTOR'S OFFICE  
CORPORATIONS  
FALL RIVER, FLORIDA

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 595920 8182938

AUTHORIZATION : 

COST LIMIT : \$ 25.00

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ORDER DATE : March 17, 2023

ORDER TIME : 1:39 PM

ORDER NO. : 595920-031

CUSTOMER NO: 8182938  
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CHANGE OF AGENT

NAME: KAKUSHA MHC, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

EXAMINER'S INITIALS: \_\_\_\_\_

**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. Name of the limited liability company: KAKUSHA MHC, LLC

2. (a) 233 S. Wacker Drive (b) 233 S. Wacker Drive

Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

Suite 4700

Suite 4700

Chicago, IL 60606

Chicago, IL 60606

05/12/2015

M15000003663

3. Date of filing/registration in Florida

4. Document number

5. (a) NRAI SERVICES, INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1200 SOUTH PINE ISLAND ROAD

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

PLANTATION, FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Corporation Service Company

NEW Registered Office Address:

1201 Hays Street

Tallahassee, FL 32301

2023 MAY 23 AM 10:13  
SECURITY  
TALLAHASSEE, FL  
D  
E

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/S/ Jill Cilmi

Jill Cilmi, Authorized Representative

Signature of a member or authorized representative of a member

Printed or typed name of signer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

Grace E. Kirby  
Signature of Registered Agent  
Grace E. Kirby, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314  
FILING FEE: \$25.00