M15000005216

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088

Date:June 19, 2020	Account#: 12000000000		
Name: KEN HOWELL			
Reference #:			
Entity Name: SAGE INVESTMENT HOLDING	SS III, L.L.C.		
Articles of Incorporation/Authorization to Transact Busin	ess		
☐ Amendment			
✓ Change of Agent	ISSUES? CALL		
Reinstatement	KEN:		
Conversion	518-213-0738		
Merger Merger			
☐ Dissolution/Withdrawal			
Fictitious Name			
Other			
Authorized Amount: \$25.00			
Signature:			

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

(a)	Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	No Change	N	o Change
	July 2, 2015		M15000005216
	Date of filing/registration in Florida	4.	Document number
(a)	C T CORPORATION SYSTEM		
()	Registered Agent and Registered Office shown on the rec	ords of the Florida Dep	pt, of State:
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address (MUST BE FLORIDA ST	<u>"REET ADDRESS)</u>	20.20.
	PLANTATION	_, _{FL_} 33324	Zii20 JU.: 19
(b)	COGENCY GLOBAL INC.		
	Enter name of NEW Registered Agent and/or NEW Reg	gistered Office addres	<u>. </u>
	115 North Calhoun St., Suite 4		A:: 10: 03
	NEW Registered Office Address:		
	Tallahassee	, _{FL} 32301	

the articles of organization or the operating agreement of the limited liability company.

/s/ Jason Altberge	r
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Jason Altberger

Signature of a member or authorized representative of a member

Printed or typed name of signee

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. Thereby confirm that the limited liability company has been notified in writing of this change.

/s/ Tim Mayville

Signature of Registered Agent

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