M16000006344

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(Address)				
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STORT

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 027613 8354552					
AUTHORIZATION: Longell Repair					
COST LIMIT : \$\frac{25.00}{}					
ORDER DATE : September 23, 2021					
ORDER TIME : 9:16 AM					
ORDER NO. : 027613-370					
CUSTOMER NO: 8354552					
CHANGE OF AGENT					
NAME: MCR PROPERTY MANAGEMENT 6 LLC					
NAME: MCR PROPERTY MANAGEMENT 6 DDC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland					

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. Na	ame of the limited liability company: MCR PROPE	RTY MANAGE	MENT 6 LLC
2. (a)	1503 LBJ Freeway, Suite 300	(b)	
z. (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)
	Dallas, TX 75234		
	07/27/2015	M15	000006344
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Cogency Global Inc.		
J. (a)	Registered Agent and Registered Office shown on the records of	of the Florida Dept.	of State:
	115 N. Calhoun Street, Suite 4		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
	Tallahassee	32301	ZOZI SEP SECRETA
	tallanassee, F	· ل	
(b)			
(0)	Enter name of NEW Registered Agent and/or NEW Registered	ed Office address:	
	Corporation Service Company		MH 9: 09
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee	32301	
	, [· L	
hange agent v was/we	imited liability company is not organized under the later or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited later authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ne registered off liability compan of the limited l	ice and the business office of the registered iy, it is hereby confirmed that the change(s) iability company or as otherwise provided in
	ill Cilmi		Authorized Person
_	ture of a member or authorized representative of a member		Printed or typed name of signee
I herei provisi he obl o mere totified	by accept the appointment as registered agent and ag ons of all statutes relative to the proper and complet igations of my position as registered agent as provid ly reflect a change in the registered office address, it is in writing of this changes	gree to act in thi e performance of led for in Chapte Thereby confirm Comoration Sc	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed a that the limited liability company has been rvice Company
•		-	, Asst. Vice President
Signatu	re of Registered Agent	-	