M1500006762

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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	ACCOUNT NO.	:	1200000019	95			
	REFERENCE	:	768129	8182938			
	AUTHORIZATION	:	A Lat	e nam	,		
	COST LIMIT	:	\$ 25.00	e dan			_
							-
ORDER DATE :	May 24, 2023						
ORDER TIME :	1:50 PM				Ęŕ	2(
ORDER NO. :	768129-002				MU)23 H,	
CUSTOMER NO:	8182938				SVII -	2023 MAY 25	ن د حدیدے محمد م
					 م		-771
	CHANGE OF A	AGENI	-			AH 10: 08	C

NAME: ELMWOOD MHC, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

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.

2. (a)	233 S. Wacker Drive	(b)	233 S. W	acker Drive					
(u)	Principal office address of limited liability company; (<u>Note: MUST BE STREET ADDRESS</u>)		~)		Mailing address of limite (Note: MAY BE POS	-	-	-		
	Suite 4700			Suite 4700						
	Chicago, IL 60606			Chicago,	IL 60606					
	08/26/2015		ľ	и1500000	6762					
3.	Date of filing/registration in Florida	4.	_		Document number					
5. (a)	NRAI SERVICES, INC.									
). (u)	Registered Agent and Registered Office shown on the records of	the Florid	a 1	Dept. of Stat	-					
	1200 SOUTH PINE ISLAND ROAD									
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>S)</u>		-		202			
					-	ÄL.	2023 MAY 25	<u> </u>		
	PLANTATION Fi				_		17 2	ن د میراند الاعلمی ا		
						TAL AHASSEE PI		; ;]]		
(b)	Enter name of NEW Registered Agent and/or NEW Registered		-	·····	-		NM 10: 08	\bigcirc		
				<u></u> .		<u> </u>	0:0			
	Corporation Service Company						Β			
	NEW Registered Office Address:				-					
	1201 Hays Street				-					
	Tallahassee	32301								
hange igent w vas/we	imited liability company is not organized under the lay or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited li- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the register ability co of the lim	ed om nit	office and pany, it is ed liability	I the business office hereby confirmed t company or as othe	of the r hat the o	egister hange	ed (s)		
,	/S/ Lakecia Stanford	Lak	e	cia Stanfor	d, Authorized Perso	n				
	ure of a member or authorized representative of a member				Printed or typed name of					

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.

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President

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

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