M16000000 296

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C. GOLDEN FEB 1 9 2019

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: OTGG MANA	GER, LLC			
2 (a)		5430 LBJ Freeway, Suite 1400		(b) 5430 LBJ Freeway, Suite 1400		
	(11)	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 T> 75240		Dallas, TX 75240		-1
		01/12/2016		M16000000296		
3.		Date of filing/registration in Florida	4.	Document number		
5.	(a)	C T Corporation System				
ν. (` ,	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State:		
		1200 South Pine Island Road		, .	201	
		Registered Office Address (MUST BE FLORIDA STREET		2019 FEB L PM	n	
		Plantation, F	FL <u>33324</u>	——————————————————————————————————————	P	M
	(b)	Corporation Service Company			اً ق	
	()	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office add	ress:	39	
		1201 Hays Street				
		NEW Registered Office Address:				
		Tallahassee , F	L_32301			
the age wa the	e cha ent w s/we arti	imited liability company is not organized under the lange or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members (less of organization or the operating agreement of the soft organization or the operating agreement of the soft of authorized representative of a member of the appointment as registered agent and agents of all statutes relative to the proper and completing ignations of my position as registered agent as providing the reflect a change in the registered office address.	of the regist liability con tof the limited li	ered office and the business offinpany, it is hereby confirmed the ted liability company or as other ability company. ilmi, Authorized Person Printed or typed name of in this capacity. I further garee	ice of the at the chewise pro	e registered nange(s) ovided in
noi	приес	Cli M Lew				rus oven
.11	și i di (i)	re of Registered Agent Corporation Service Company	DT. Al	ni M. Casper, Asst. Vice Pres	ident	