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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : UNITED AGENT GROUP INC.  
Account Number : I20160000086  
Phone : (561)508-5033  
Fax Number : (561)694-1639

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

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**LLC REGISTERED AGENT CHANGE  
LIPT MADISON INDUSTRIAL LANE, LLC**

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# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: LIPT Madison Industrial Lane, LLC

2. (a) Principal office address of the limited liability company: 333 WEST WACKER DRIVE, 2ND FLOOR  
CHICAGO IL 60606

(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company: 333 WEST WACKER DRIVE, 2ND FLOOR  
CHICAGO IL 60606

(Note: **MAY BE POST OFFICE BOX**)

3/23/2016

3. Date of filing/registration in Florida

4. Document number M16000002436

5.(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: CORPORATION SERVICE COMPANY

Registered Office Address: 1201 HAYS STREET  
TALLAHASSEE FL 32301

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

**NEW Registered Agent** United Agent Group Inc.

**NEW Registered Office Address** 801 US Highway 1  
North Palm Beach FL 33408

**(MUST BE FLORIDA STREET ADDRESS)**

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.

[Signature]  
 (Signature of a member or authorized representative of a member)

Joseph Panholzer, Attorney-in-Fact  
 (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, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature]  
 (Signature of Registered Agent) Joseph Panholzer, Special Secretary

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**