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Account#: I20000000088

Date:	05/01/2019	
	Joy Weaver	_
Reference	1075979	
	ne: CRUCON REAL E	STATE HOLDINGS, LLC
Am Cha Rei Cor	icles of Incorporation/Authorization mendment ange of Agent instatement nversion rger solution/Withdrawal	to Transact Business 13.11.24.25.25.25.25.25.25.25.25.25.25.25.25.25.
	titious Name	
∐ Oth	ner	
Authorized	d Amount: \$25.00	

F: 800.944.6607

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

Principal office address of limiter (Note: MUST BE STREE		Mailing address of limited liability compan (Note: MAY BE POST OFFICE BOX)
No Change .		No Change
October 18, 2016		M16000008382
Date of filing/registration	n in Florida 4.	Document number
COOK, JAY F		
Registered Agent and Registered Office s	shown on the records of the Florida De	ept, of State:
9123 TRIVOLI TERRACE		
Registered Office Address (MUST B)	E FLORIDA STREET ADDRESS)	
NAPLES	, FL_ 34119	
COGENCY GLOBAL INC.		2019 HAY -
COGLING I GLOBAL INC.		
Enter name of NEW Registered Agent :	md/or NEW Registered Office addre	~ . · · · · · · · · · · · · · · · · · ·
Enter name of <u>NEW Registered Agent</u> ;		AM
Enter name of NEW Registered Agent : 115 North Calhoun St., Suit		

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

/s/ Sandra	L. Clear	y
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Sandra L. Cleary

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, I hereby 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