## Florida Department of State

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## LLC REGISTERED AGENT CHANGE SKYPLEX, LLC

| Certificate of Status | 0       |
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## 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: SKYPLEX, LLC  |  |   |
|---|---|--|---|
| 2. (a)                                    |   |  | (b)   |
| ()  | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  |  | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)  |
|   | 1776 PEACHTREE ST. NW, SUITE 100  |  | 1776 PEACHTREE ST. NW, SUITE 100  |
|   | ATLANTA, GA 30309   | <del></del>                            | ATLANTA, GA 30309   |
|   | 04/18/2017  |  | M17000003321  |
| 3.  | Date of filing/registration in Florida  | -<br>4.                                | 4. Document number  |
| 5. (a)                                    | HERTZ, CLIFFORD I.  |  |   |
| J. ( <u>a</u> )                           | Registered Agent and Registered Office shown on the records of  | the Flo                                | Florida Dept. of State:   |
|   | ONE NORTH CLEMATIS STREET, SUITE 500  |  |   |
|   | Registered Office Address (MUST BE FLORIDA STREET A   | 1DDR                                   | DRESS)  |
|   |   |  |   |
|   | WEST PALM BEACH   | 3340                                   | → ωr  |
|   | WEST PALM BEACH , FL  |  | <del>2</del> ^*/  |
| (b)                                       |   |  |   |
| (-)                                       | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>  | Office                                 | lce address:  |
|   | 360 SOUTH ROSEMARY AVENUE, SUITE 1410   |  | <b></b> Po  |
|   | NEW Registered Office Address:  |  |   |
|   | NEW Registered Office Address.  |  | 18 AM 8: 15   |
|   | WEST PALM BEACH   | 33401                                  | 401   |
|   | , FL  |  |   |
| change<br>agent w<br>was/we               | or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited lia  | regist<br>bility<br>f the l            | ty company, it is hereby confirmed that the change(s) e limited liability company or as otherwise provided in   |
| _   |   | Jo                                     | Jon Brees   |
| l hereb<br>provision<br>he obli<br>o mere | ure of a member of authorized represcriptive of a member by accept the appointment as registered agent and agree on a fall statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and this change. | ee to d<br>perfor<br>I for it<br>ereby | Printed or typed name of signee o act in this capacity. I further agree to comply with the formance of my duties, and I am familiar with and accept r in Chapter 605, F.S. Or, if this document is being filed by confirm that the limited liability company has been |
| Signatur                                  | e of Registered Agent   |  |   |
|   |   |  |   |