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Division of Corporations

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LLC REGISTERED AGENT CHANGE EDISON CAPITAL JACKSONVILLE LLC

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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.

l. Na	me of the limited hability company: EDISON CAPITA	۱L J.۸	CKSONVILLI	E LLC	<u>. </u>
2. (a)	300 Crescent Court		(b) 300 Cres	scent Court	
,	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	_		Mailing address of limite INote: MAY BE POS	
	SUITE 700		SUITE 70	00	
	Dailas, TX 75201	_	Dallas, T	X 75201	
	07/07/2017		M1700000)5763	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CORPORATION SERVICE COMPANY				
t, (a)	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	the Flo	rida Dept of Sta	ate:	
	Registered Office Address (MUST BE FLORIDA STREET)	1 <i>DDR</i>	<u>ESSI</u>	_	
	TALLAHASSEE , F1.	3230			2023 1
(b)	C.T. Corporation System			_	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office	<u>address</u>		
	NEW Registered Office Address:			_	– ယ္ ယ
	1200 South Pine Island Road		·		34
	Plantation , FL	3332			
he cha igent was we he arti	imited liability company is not organized under the lay nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	ws of the re ability of the limit	the State of Fegistered offi- company, it limited liabiled liabiled	ce and the business or is hereby confirmed ity company or as other	ffice of the registered that the change(s)
	ture of a member or authorized representative of a member	-		Printed or typed name	of signee
provisi the obli to mere notified By: SE	by accept the appointment as registered agent and cap ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address. I fin writing of this change. CT Corporation System ANL EMERICK, ASSISTANT SECRETARY TO OF REGISTERED ASSISTANT SECRETARY	perjo d for . herch	act in this ca rmance of m in Chapter 60 y confirm tha	pacity. I further agre y duties, and I am jan 95, F.S. Or, if ihis do it the limited hability	ve to comply with the nilier with and accep wiment is being filed company has been

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