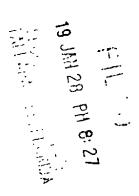
## 117000006838

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	_
(Cit	y/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Centificates	s of Status
Special Instructions to	Filing Officer.	

Office Use Only



600323122456



19 Jr.425 Pm H: 18

K SAIY JAN 20 153



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088

Date:	01/25/2019	
Name:	Merritt Walker	_
	ce #:C023963	_
Entity Na	ame: OPENDOOR F	ROPERTY W6 LLC
☐ Ar	rticles of Incorporation/Authorization	to Transact Business
☐ Ar	mendment	
<b>₽</b> CI	hange of Agent	
☐ Re	einstatement	
□ Co	onversion	
<u>М</u>	erger	
☐ Di	issolution/Withdrawal	
☐ Fi	ctitious Name	
	ther	
Authorize	ed Amount: <b>\$25</b>	
Signature	e: JAM	

COCENCY GLOBAL INC. 10 E 4011 ST, 1011 FL INY INY 10016 D: 4131 B47 7300

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

Pursuant to the provisions of sections 605.0114, 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. Nan	ne of the limited liability company:OPENDOOF	R PROPERTY W6 LLC		
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	405 Howard Street, Suite 550		
	(INIC. MOOT BESTREET TIDDRESS)	San Francisco, CA 94105	5	7.7.
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	405 Howard Street, Suite 550	The state of the s	
	TABLE BOY OF THE BOX	San Francisco, CA 94105		<u></u>
8/	10/2017	M17000006838		્છે. વ્
3. Date	of filing/registration in Florida	4. Document number	٠ بيري٠	
5. (a)	Registered Agent and Registered Office shown on	the records of the Florida Dept.	of State:	
	Registered Agent:	Corporation Service Comp	any	
Registered Office Address:		1201 Hays Street		
		Tallahassee, FL 32301-2525		
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEY NEW Registered Agent</u> :	COGENCY GLOBAL INC.  115 North Calhoun St., Suite		
NEW Registered Office Address: 115 North Calhoun (MUST BE FLORIDA STREET ADDRESS)		113 North Californ St., Suite	<del></del>	
	(MOST BE LEGRIDA STREET ADDRESS)	Tallahassee	FL_32301	
confirn and the liability the men the ope	mited liability company is not organized under the ned that after the change or changes are made, the F business office of the registered agent will be identy company, it is hereby confirmed that the change(s) inbers of the limited liability company or as otherwing agreement of the limited liability company.	lorida street address of the regis ical. Or, in the case of a Florida was/were authorized by an affi	tered offi Llimited rmative v	ote of
	son Child of a member or authorized representative of a member	_		
Jason				
	or typed name of signee	<u> </u>		
	by accept the appointment as registered agent and a with the provisions of all statutes relative to the pring familiar with and accept the obligations of my point of the pring filed to me to the filed t	gree to act in this capacity. I fu oper and complete performance sition as registered agent as pro rely reflect a change in the regi y has been notified in writing of	rther agi of my du ovidéd fo stered of, this chái	ree to ities, r in fice nge.

Signature of Registered Agent Tim Mayville, Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

/s/ Tim Mayville