M1700000 6840

(Red	questor's Name)		
(Add	dress)			
(Add	dress)			
(City	//State/Zip/Phor	ne #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	siness Entity Na	me)		
(Document Number)				
Certified Copies	Certificate	es of Status		
Special Instructions to Filing Officer:				
		į		

Office Use Only



100322980011

2013 JAN 28 AM 9: 12

19 JAN 28 RT 10: 5

1-39-19



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

Account#: I2000000088

Date: 0	1/25/2019	
	Merritt Walker	_
Reference #:	C023963	_
Entity Name:	OPENDOOR I	PROPERTY W4 LLC
	of Incorporation/Authorization	
Amendn	nent	
Change	of Agent	
Reinstat	tement	
Convers	sion	
Merger		
☐ Dissolut	ion/Withdrawal	
Fictitious	s Name	
Other_		
Authorized Am	ount: \$25	
Signature:	ıMW	

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. Name of the limited liability company: OPENDOO	R PROPERTY W4 LLC	
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 405 Howard Street, Suite 550	<u>) </u>
(Mic. Most be of the first the stage)	San Francisco, CA 94105	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	405 Howard Street, Suite 5	
	San Francisco, CA 94105	ALC: A
8/10/2017	M17000006840	28 28 28 28
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida I	T, 19:
Registered Agent:	Corporation Service (
Registered Office Address:	1201 Hays Street	
	Tallahassee, FL 32301-252	5
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE NEW</u> Registered Agent:	COGENCY GLOBAL IN	IC.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	115 North Calhoun St.,	Suite 4
MOST BE TEORIDA STREET ADDRESS	Tallahassee	.FL_32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(s the members of the limited liability company or as otherw the operating agreement of the limited liability company.	lorida street address of the tical. Or, in the case of a F) was/were authorized by a	registered office lorida limited n affirmative vote of
/s/ Jason Child Signature of a member or authorized representative of a member	_	
Jason Child	- -	
Printed or typed name of signee		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pr and I am familiar with and accept the obligations of my po Chapter 605, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability compan	ngree to act in this capacity oper and complete perform osition as registered agent erely reflect a change in the oy has been notified in writ	:. I further agree to nance of my duties, as provided for in e registered office ing 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