## 117000006850

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Account#: I20000000088

Date:0^	1/25/2019	
Name:	Merritt Walker	_
Reference #:	C023963	_
Entity Name:	OPENDOOR F	PROPERTY W7 LLC
Articles	of Incorporation/Authorization	to Transact Business
Amendn	nent	
Change	of Agent	
Reinstat	ement	
☐ Convers	ion	
Merger		
☐ Dissolut	ion/Withdrawal	
Fictitious	s Name	
Other_		
Authorized Ame	ount: <b>\$25</b>	<del></del>
Signature:	UW	

## 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: _	OPENDOOR	PROPERTY W7 LLC	
2. (a) Principal office address of limited liab (Note: MUST BE STREET ADDRE	oility company: ESS)	405 Howard Street, Suite 550	0
(	<del>,</del> ,	San Francisco, CA 94105	- 0
(b) Mailing address of limited liability co (Note: MAY BE POST OFFICE B)		405 Howard Street, Suite 5	50
		San Francisco, CA 94105	. 0,
8/10/2017		M17000006850	9
3. Date of filing/registration in Florida	۷	. Document number	
5. (a) Registered Agent and Registered Off	ice shown on th		•
Registered Agent:		Corporation Service (	Joinpany
Registered Office Address:		1201 Hays Street	·
		Tallahassee, FL 32301-252	5
(b) Enter name of <u>NEW Registered Age</u> <u>NEW</u> Registered Agent:	nt and/or <u>NEV</u>	Registered Office add	
NEW Registered Office Address:	DBECC)	115 North Calhoun St.,	Suite 4
(MUST BE FLORIDA STREET AD	DKESS)	Tallahassee	,FL_32301
If the limited liability company is not organize on firmed that after the change or changes are and the business office of the registered agen liability company, it is hereby confirmed that the members of the limited liability company the operating agreement of the limited liability.	e made, the Flo t will be identic the change(s)	orida street address of the cal. 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 mer	nber		
Jason Child			
Printed or typed name of signee		•	
I hereby accept the appointment as registere comply with the provisions of all statutes rela and I am familiar with and accept the obliga Chapter 605, F.S. Or, if this document is bei address, I hereby confirm that the limited lian	d agent and ag utive to the pro- tions of my pos- ng filed to mer bility company	ree to act in this capacity per and complete perforn ition as registered agent ely reflect a change in the has been notified in writi	: I further agree to nance of my duties, as provided for in gregistered office ing of this change.

/s/ Tim Mayville

Signature of Registered Agent Tim Mayville, Assistant Secretary