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To: Division of Corporations Fax Number : (850)617-6383 From: Account Name : UNITED AGENT GROUP INC. Account Number : 120160000086 Phone : (561)508-5033 Fax Number : (561)694-1639  $\infty$  \*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*  $\overline{\mathbf{C}}$ N. Email Address: ---2022 MAR 7 LLC REGISTERED AGENT CHANGE ٠. **OPENDOOR PROPERTY D LLC** -0 Certificate of Status 2022 HAR - 7 0 Certified Copy 02 Page Count \$25.00 Estimated Charge PH 4:

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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.

I. Na	me of the limited liability company: OPENDOO	R PROP	ERTY D	LLC				
2. (a)	410 N Scottsdale Rd, Suite 1600 Principal office address of limited liability company: ( <u>Note: MUST BE STREET ADDRESS</u> )	(b)	(b) <u>410 N Scottsdale Rd, Suite 1600</u> Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Tempe, AZ 85281					
	Tempe, AZ 85281							
	10/12/2017	<u> </u>	M170000	08733				
3.	Date of filing/registration in Florida	4.		Document nun	nber			
5. (a)	COGENCY GLOBAL INC.							
J. (a)	Registered Agent and Registered Office shown on the records of	f the Florida	Dept. of Stat	e:				
	115 NORTH CALHOUN STREET STE 4							
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	 !	_				
	TALLAHSSEE	L3230	1	_		2022 MAR - 7		
(b)	United Agent Group Inc.					AR -	- T	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office add	iress:	-		J		
						PH		
	801 US Highway 1			_		Ë	Ċ.	
	NEW Registered Office Address:					28		
				_				
	North Palm Beach	L <u>33408</u>		_				
change agent v was/w the art Signa	imited liability company is not organized under the la e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the mut of a number or authorized representative of a member	e registere iability con of the limi c limited li Jen	d office an mpany, it i ited liabilit ability con isa lrizar	id the business of is hereby confirm ty company or a npany. rry, Attorney-i Printed or typed	in-Fact	ie regis ie char ie prov	nge(s) rided in	
provis the ob to mer	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d'in writing of this change.	e perjorma ed for in C 'hereby co	ince oj my Thanter 60	5. F.S. Or. if th	is documer	nt is be	eing filed	
L	Junt - Jenisa Irizarry, Special Se	cretary						

Signature of Registered Agent

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