## M17000009287

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer.						

Office Use Only



100439122771

2025 JAN 15 PM 1: 15

-CEIVED

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

i	ACCOUNT NO.	: 120	0000001	95		
	REFERENCE	: 863	255 <sub>1</sub>	8357615		
ΑU	THORIZATION			exile-	ノ	
	COST LIMIT	: \$ 2	5.00			
ORDER DATE : Decei	mber 30, 2024					
ORDER TIME : 9:14	4 AM					
ORDER NO. : 8632!	55-369					
CUSTOMER NO: 83	357615					
			<b></b> _	<b></b>		
CHANGE OF AGENT						
NAME. T	AH 2017-2 BOR	DOMED :	I I C			
MANE. I	4n 2017-2 box	KOWEK .	n n c			
PLEASE RETURN THE I	FOLLOWING AS	PROOF (	OF FILI	NG:		
CERTIFIED (XX PLAIN STAME						
CONTACT PERSON: Ar	manda Miller					

EXAMINER'S INITIALS:

## 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:	017-2 BOR	ROWER LL	С		
	15771 Redhill Avenue, Suite 100	_	(b)			
z. (a)	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS		(-/-	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	Tustin, CA 92780		. <u>-</u>			
	11/01/2017		M176	000009287		
3.	Date of filing/registration in Florida		4.	Document number		
5. (a)	C T Corporation System					
ره) .د	Registered Agent and Registered Office shown on the	records of the	Florida Dept.	of State:		
	1200 South Pine Island Road			: <b>-2</b>		
	Registered Office Address (MUST BE FLORIDA	STREET AL	DDRESS)	RS LA		
	Plantation	, FL_	33324	FILEU 2025 JAN 15 PH 1: 15 TÄLLAHÄSSEE, FLORIDA		
(L)				P -		
(b)	Enter name of NEW Registered Agent and/or NEW	Registered C	office address:	FLORIDA		
	Corporation Service Company			P		
	NEW Registered Office Address:			<del></del>		
	1201 Hays Street					
	Tallahassee	, FL_	32301			
agent v	imited liability company is not organized und or changes are made, the Florida street addre	ler the laws ess of the re limited liab nembers of	of the State egistered of ility compar the limited mited liabili	ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.		
	/s/ Wissam Francis			Wissam Francis, Chief Financial Officer		
I here provisi the obi to mer notifie	ture of a member or authorized representative of a memby accept the appointment as registered agentions of all statutes relative to the proper and eligations of my position as registered agent as ely reflect a change in the registered office and in writing of this change.	it and agree complete pe s provided ddress, I he Co	for in Chapi for in Chapi reby confin rporation S	Printed or typed name of signee his capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed in that the limited liability company has been Service Company er, Asst. Vice President		