## MITCCCO 10574

(Requestor's Name) (Address)		
(Address)	400352192414	
(City/State/Zip/Phone #)	10/02/2001021011 **25.00	
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status	~ 1 :	
Special Instructions to Filing Officer:	-£ 7::10: 1:3	

Office Use Only

R. 19HATE NOV 1 0 2020



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: September 30, 2020

Order#: 419232-081

Re: JHPDE FINANCE I, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.XCOA

## 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.

1.	Name of the limited liability company: JHPDE FINA	ANCE I, LLC	
2. (a	5757 Phantom Drive, Suite 250	(b)	
(	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	Hazelwood, MO 63042		
	12/13/2017	M17	7000010574
3.	Date of filing/registration in Florida	4.	Document number
5. (	C T Corporation System		
J. (	Registered Agent and Registered Office shown on the record 1200 South Pine Island Road	ds of the Florida Dept	t, of State:
	Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)	
	Plantation	33324	
		,FL	
(t	)		ro i
•	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Office address	· · · · · · · · · · · · · · · · · · ·
	Corporation Service Company		
	NEW Registered Office Address:		<del></del>
	1201 Hays Street		<del></del>
	Tallahassee	, FL_32301	
chan agen was/	limited liability company is not organized under the ge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite were authorized by an affirmative vote of the member ticles of organization or the operating agreement of	the registered of d liability compa ers of the limited	fice and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in
/s/ .	ill Cilmi	Jill Cilmi	, Authorized Person
	nature of a member or authorized representative of a member		Printed or typed name of signee
prov the o to m	weby accept the appointment as registered agent and sions of all statutes relative to the proper and complobligations of my position as registered agent as proverely reflect a change in the registered office address ed in writing of this change.	lete performance	of my duties, and I am familiar with and accept
	( li, M'Lei	Corporation S	ervice Company
Signa	ture of Registered Agent	Ami M. Caspe	er, Asst. Vice President