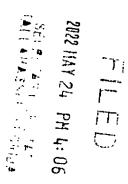
M 18000005063

(Re	equestor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Bu	siness Entity Nan	ne)			
(Do	ocument Number)	<u> </u>			
Certified Copies	Certificates of Status				
Special Instructions to	Filing Officer:				





500376705725



ABULER 6/9/22 LLC RACH CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : 12000000195							
REFERENCE : 676504 8331866							
AUTHORIZATION: Lucille man							
COST LIMIT : \$ 25,00							
ORDER DATE: May 16, 2022							
ORDER TIME : 1:30 PM							
ORDER NO. : 676504-096							
CUSTOMER NO: 8331866							
CHANGE OF AGENT							
NAME: BCORE DEFENDER FL2W08 - W09, LLC							
DDC.							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
X PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker							
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.

l. Na	me of the limited liability company:	FENDER F	L2W08 - \	W09, LLC			
2. (a)	233 S. Wacker Drive, Suite 4700		b)				
. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Chicago, IL 60606						
	05/25/2018		M18000	005063			
3.	Date of filing/registration in Florida	4.		Document num	nber		
5. (a)	C T Corporation System						
5. (a)	Registered Agent and Registered Office shown on the record	is of the Florid	ia Dept. of S	State:			
	1200 South Pine Island Road						
	Registered Office Address (MUST BE FLORIDA STRE	ET ADDRES	<u>(S)</u>				
	Plantation	, FL3332	4		~ €	33	
					7 5	2022	
(b)	Enter name of NEW Registered Agent and/or NEW Regist				*	HAY	-r:
	Enter name of NEW Registered Agent and/or NEW Regist	ered Office a	ddress:		24 \$ 1	2	
	Corporation Service Company				- 15	+ PM	'n
	NEW Registered Office Address:				- 9:2		
	1201 Hays Street		· ,		<u> </u>	: 06	
	Tallahassee	, FL_32301					
change agent v was/w	imited liability company is not organized under the or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membeicles of organization or the operating agreement of	e laws of the the registered liability of the line	e State of red office company, i mited liab	and the business of it is hereby confin ility company or a	office of the ned that the	registe chang	ered ge(s)
/s/ Ji	ll Cilmi	Jil	Cilmi, Au	thorized Person			
-	ture of a member or authorized representative of a member			Printed or typed			
ine ooi to mer	by accept the appointment as registered agent and ions of all statutes relative to the proper and compi ligations of my position as registered agent as prov ely reflect a change in the registered office address	agree to ac lete perform vided for in s, I hereby c	ct in this c nance of n Chapter (confirm th	apacity. I further ny duties, and I an 305, F.S. Or, if thi at the limited liab	agree to co 1 familiar w is documen ility compa	emply we with and t is beli ny has	vith the d accep ng filed been
notifie	din writing of this charge.			ce Company			
Signatu	ire of Registered Agent	Ami M. (Casper, A	sst. Vice Preside	ent		