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Account#: 12000000088

Date:	01/25/2019			
	Merritt Walker	_		
	C023963			
Entity Name:	OPENDOOF			
	s of Incorporation/Authorizatio			
Chang	je of Agent			
Reinstatement Conversion				
Merger				
Dissolution/Withdrawal				
	ous Name			
U Other	<u>, </u>			
Authorized A	mount:\$25			

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Signature: ______ MM

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 CLLC
- 2. (a) Principal office address of limited liability company: <u>405 Howard Street, Suite 550</u> (Note: MUST BE STREET ADDRESS)
 - (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)

8/7/2018

- 3. Date of filing/registration in Florida
- 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

Registered Office Address:

Corporation Service Company 1201 Hays Street Tallahassee, FL 32301-2525

San Francisco, CA 94105

San Francisco, CA 94105

M18000007270

Document number

405 Howard Street, Suite 550

COCENCY OF ODAL INC

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

<u>NEW</u> Registered Agent:	115 North Calhoun SE Suite 4	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		
MUST DE LEURIDA STREET ADDRESS	Tallahassee	32243

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Horida limited liability company, it is hereby confirmed that the change(s) was/were authorized by againmentive vote of the members of the limited liability company or as otherwise provided in the articles of an analysis of the limited liability company.

/s/ Jason Child

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Signature of a member or authorized representative of a member

Jason Child

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

/s/ Tim Mayville

Signature of Registered Agent Tim Mayville, Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00