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(Requestor's Name)									
(Address)									
(Address)									
(Cit	ty/State/Zip/Phone	e #)							
PICK-UP	MAIT	MAIL							
(Business Entity Name)									
(50	Siliess Entity (var	ne,							
(D.									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to	Filing Officer:								





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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: February 13, 2020

Order#: 171284-077

Re: BH MADISON PLACE MANAGER, 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: Erika Zavala Daza 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.

QUCA.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.	Na	me of the limited liability company: BH MADISON PL	LACE MA	ANAGER, LL	<u>C</u>			
2	(a)	400 LOCUST ST, STE 790	_ (b)	400 LOC	JST ST, STE 790			
<u>-</u> .	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		DES MOINES, IA 50309		DES MOINI	ES, IA 50309			
		08/15/2018		M180000075	552			
3.		Date of filing/registration in Florida	4.		ocument number			
5.	(a)	REGISTERED AGENT SOLUTIONS, INC.						
		Registered Agent and Registered Office shown on the records of the	ne Florida I	Dept. of State:				
		155 OFFICE PLAZA DR.						
		Registered Office Address (MUST BE FLORIDA STREET AD	DDRESS)					
_SUITE A								
		TALLAHASSEE ,FL_	32301				2020 FEB	ን
	(b)	Corporation Service Company					8	<u>.</u> [
	(-)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	ress:			7	.,
							A	7 }
		1201 Hays Street					ف	
		NEW Registered Office Address:			•	<u>.</u>	5 ω	
		Tallahassee , FL_	32301					
th ag w th	e cha gent v as/we e arti Signa	mited liability company is not organized under the law nge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law e Combane of a member or authorized representative of a member by accept the appointment as registered agent and agree	the regist bility cor the limi imited limi Jill C	ered office anneany, it is hotel liability cability compairs ilmi, Authoriz	nd the business of ereby confirmed company or as otherwise. ed Person rinted or typed name (it): I further agree	ffice that the the the the the the the the the th	of the re he chan se provi-	egistered ge(s) ded in
nc	nifiei	ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	performa I for in Ci ereby coi	nce of my du hapter 605, F nfirm that the	ues, and Lam fan 7.S. Or, if this do ≥ limited liability	uttar cume comp	with an int is hei any has	a accept ing filed been
<u>-</u> S	<u>J</u> ignatu	re of Registered Agent Corporation Service Company	BY: Gr	ace E. Kirby	y, Asst. Vice Pro	eside	nt	