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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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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: April 6, 2020

Order#: 245162-038

Re: 2016 GRAND CYPRESS DR 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.

	ame of the limited liability company: 2016 GRAND C	<u>YPRESS</u>				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	PLANO, TX 75074	_	PLANO,	TX 75074		
	09/11/2018		M180000	008336		
3.	Date of filing/registration in Florida	4.		Document number	_	
5. (a) CAPITOL CORPORATE SERVICES, INC.					
5. (a) (b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
	515 EAST PARK AVENUE					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_		
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	ZIND FL			- A:	2020 APR	ಆಭಾ
	TALLAHASSEE , FL	32301		_		
				ALLAHASSEL	8	<u></u> ,
	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address:			_ 	PH	
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	<u>ess</u> :	<u> </u>	ċ.	-
	1201 Hays Street				-	
	NEW Registered Office Address:	<u> </u>		_ '		
	Tallahassee , FL_	32301		_		
the chagent was/v	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	s of the s the regist bility cor f the limi	ered offic npany, it ted liabili	e and the business office is hereby confirmed that ty company or as otherw	e of the r the chai	registered nge(s)
			Jill Cilmi, Authorized Person			
_	ature of a member or authorized representative of a member			Printed or typed name of si	-	
попри	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address. I held in writing of this change.					with the nd accept eing filed is been
Signat	ture of Registered Agent Corporation Service Company	BY: Gr	ace E. Ki	irby, Asst. Vice Presid	ent	