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→ 18506176383 Division of Corporations



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| From | : Account Name : UNIT | TED ACENT CROUD INC | | |
| | Account Name : UNII Account Number : 1201 | | | |
| | | 1)508-5033 | | |
| | Fax Number : (561 | • | | |
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| **Enter th | e email address for this | business entity to be us | ed for future | |
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| Email | Address: | | <u></u> , | |
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| · • • | LLC REGISTERED AGENT CHANGE | | | |
| <u> </u> | LEC REGISTERED AGENT CHANGE | | 20 | |
| • | OPENDOOR PROPERTY J LLC | | | |
| | Certificate of Status | 0 | 2022 HAR | |
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Help

| LIMITED LIABI | FFICE OR REGISTERED AGENT OR BOTH FOR LITY COMPANY 6. Florida Statutes, the undersigned limited liability company red office or registered agent, or both, in the State of Florida. | |
|--|---|--|
| 1. Name of the limited liability company: OPENDOOR | | |
| 2. (a) <u>410 N Scottsdale Rd, Suite 1600</u> Principal office address of limited fiability company: (<u>Nate: MUST BE STREET ADDRESS</u>) | (b) 410 N Scottsdale Rd, Suite 1600 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | |
| Tempe, AZ 85281 | Tempe, AZ 85281 | |
| 10/15/2018 | M18000009463 | |
| 3. Date of filing/registration in Florida | 4. Document number | |
| Registered Agent and Registered Office shown on the records of <u>115 NORTH CALHOUN STREET STE 4</u> Registered Office Address <u>(MUST BE FLORIDA STREET</u> | ADDRESS) | |
| TALLAHSSEE | 32301 AF | |
| (b) United Agent Group Inc. | | |
| Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u> 801 US Highway 1 | d Office address: | |
| NEW Registered Office Address: | 32 | |
| North Palm Beach | L <u>33408</u> | |
| If the limited liability company is not organized under the la change or changes are made, the Florida street address of th agent will be identical. Or, in the case of a Florida limited l was/were authorized by an affirmative vote of the members the articles of organization or the operating agreement of the | of the limited liability company or as otherwise provided in | |
| Int | Jenisa Irizarry, Attorney-in-Fact | |
| Signature of a member or authorized representative of a member | Printed or typed name of signce | |
| I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete the obligations of my position as registered agent as provide to merely reflect a change in the registered office address. I notified in writing of this change. | ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and accept ed for in Chapter 605, F.S. Or, if this document is being filed hereby confirm that the limited liability company has been | |

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00

Jenisa Irizarry, Special Secretary