M19 000 000 910

(Requestor's Name)
10.001
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Fittine #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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2021 HAY -3 AH 12:



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: April 29, 2021

Order#: 783696-009

Re: AARETE LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$\$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX __ Issue Proof of Filing.

 \overline{XX} Please return evidence to the following:

Attn: Meghan Groom

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.

i. Na	ame of the limited liability company:	.C						
2. (a)	200 EAST RANDOLPH STREET, SUITE 3010		200 EAS	T RANDOLPH STREET, SUITE 3010 Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) D, IL 60601				
. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)							
	CHICAGO, IL 60601		CHICAGO					
	01/25/2019		M19000000910					
	Date of filing/registration in Florida	4.		Document nui	mber		 -	
5. (a)	C T CORPORATION SYSTEM							
(h)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State 1200 SOUTH PINE ISLAND ROAD			- e: -	,-+	22		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				ÄLÄ	-" 2021 HAY		
	PLANTATION	, Fl33324		_	ir NSSD	- 3		
	Enter name of NEW Registered Agent and/or NEW Registered Office address			_	ĂLLAHASSEE, FLORIDA	MH 12: 57		
	NEW Registered Office Address:							
	1201 Hays Street			-				
	Tallahassee	, FL_32301		_				
hange gent v vas/we	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 authorized by an affirmative vote of the membecles of organization or the operating agreement of	the registe d liability c ers of the li	red office an ompany, it is nited liabilit	d the business s hereby confir y company or a	office of med that	the reg	gistered ange(s)	
	/S/ Derry L. Behm mature of a member or authorized representative of a member Printed or typed name of signee							
l herel provisi he obl o mere potifier	nure of a member or authorized representative of a member by accept the appointment as registered agent and ons of all statutes relative to the proper and compligations of my position as registered agent as provity reflect a change in the registered office address in writing of this change	lete perforn rided for in s, I hereby o	iance of my o Chapter 605 confirm that	acity I further	agree to n familia nis docum pility com	comp	ly with the and accept being filed as been	

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