M19000001970

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
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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SECRETARY OF STATE
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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

Anthony Arthur anthony.arthur@cscqlobal.com From:

Date: May 30, 2019

Order#: 743681-007

Re: ARLP REO I, LLC

Enclosed please find:

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: Anthony Arthur

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

<u>XX</u> ___ 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

2. (a)	C/O HAVENBROOK HOMES	(b)	C/O HAVENBROOK	HOMES	
~. ()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	3505 KOGER BLVD, SUITE 400		3505 KOGER BLVD. SUITE 400		
	DULUTH, GA 30096		DULUTH, GA 30096		
	02/26/2019		M19000001970		
3.	Date of filing/registration in Florida		Document nu	ımber	
5. (a)	C T CORPORATION SYSTEM				
(h)	Registered Agent and Registered Office shown on the records o	Ethe Florida	Dept, of State:	19 (St. 5)	
	1200 SOUTH PINE ISLAND ROAD			· · · · · · · · · · · · · · · · · · ·	
	1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			(T) (%)	
					
	PLANTATION . F	I. <u>33324</u>		1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
	Enter name of NEW Registered Agent and/or NEW Registere 1201 Hays Street NEW Registered Office Address:	d Office add	<u></u>		
	Tallahassee				
					
the cha agent v was/we	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regist iability cor of the limit	ered office and the busin npany, it is hereby confi ted liability company or	ness office of the registered rmed that the change(s)	
	Xia & Comi	Jill C	lmi, Authorized Person		
Signa	ture of a member or authorized representative of a member	 _	Printed or typeo	I name of signee	
provisi the obl to meri	hy accept the appointment as registered agent and agions of all statutes relative to the proper and completing tions of my position as registered agent as providely reflect a change in the registered office address. It is writing of this change.	e performa ed for in Ci	nce of my duties, and La hapter 605, F.SOr, if t	m familiar with and accept his document is being filed	
	Drace Cokuble				
Signatu	re of Registered Agent Corporation Service Company	BY: Gra	ice E. Kirby, Assistan	t Vice President	