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DATE: 5/13/20

NAME: MISSION SPRINGS JV 2019 OWNER LLC

TYPE OF FILING: CHANGE OF AGENT

COST: 25.00

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AUTHORIZATION: ABBIE/PAUL HODGE Choiched

COVER LETTER

TO:

Registration Section

Divis	sion of Corporations				
SUBJECT:	MISSION SPRINGS JV 2019 OWNER LLC Name of Limited Liability Company				
SUBJECT					
Dear Sir or M	Aadam:				
The enclosed	l Registered Agent/Registered Office Char	nge and fee(s) are submitted for filing.			
Please return	all correspondence concerning this matter	er to the following:			
BRANDON S	SJELIN				
	Name of Person				
FIRST CORP	PORATE SOLUTIONS, INC.				
	Firm/Company				
12631 Imperia	al Highway, F-106				
	Address				
Santa Fe Sprii	ngs, CA 90670				
	City/State and Zip Code				
raservices@fi	coso.com				
E-mail	address: (to be used for future annual repo	ort notification)			
For further in	nformation concerning this matter, please of	call:			
BRANDON S	SJELIN 8 at (844 392-7588			
	Name of Person	Area Code & Daytime Telephone Number			
Regi Divi P.O.	ling Address: istration Section sion of Corporations Box 6327 ahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Encl	osed is a check for the following amoun	nt:			
□ \$2	25 Filing Fee	☐ \$55 Filing Fee & Certified Copy			
INHS18 (2/14)				

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. N	ame of the limited liability company: MISSION SPRIN	GS JV 20)19 OWNE	R LLC
2. (a)	8000 IH 10 WEST	((8000 IH	10 WEST
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) #1200		#1200	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SAN ANTONIO, TX 78230	_	SAN AN	TONIO, TX 78230
	06/06/2019		М1900000	05558
3. 5. (a)	Date of filing/registration in Florida CT CORPORATION SYSTEM	4.		Document number
, (a ₎	Registered Agent and Registered Office shown on the records of a 1200 SOUTH PINE ISLAND ROAD F	the Florida	Dept. of Sta	ate:
	Registered Office Address (MUST BE FLORIDA STREET)	4DDRESS	2	2020 MÀT
	PLANTATION , FL	33324		
(b)	FIRST CORPORATE SOLUTIONS, INC.			
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	중:
	155 OFFICE PLAZA DRIVE			: : : : : : : :
	NEW Registered Office Address:			_
	TALLAHASSEE	32301		
hange	imited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an aftifmative vote of the members of icles of organization or the operating agreement of the	vs of the registere ibility co f the lim limited I	d office an	nd the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi he obi o mer	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	performa	ince of mv	duties, and I am familiar with and accept
Signaty	of Registered Agent			