M900009628

(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.					
J. HORNE					
JUN 1 3 2022					

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2022 JUN 10 PH 3: 22 DIVISION OF COMPORATIONS TALLAHASSEE, FLORID CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 737317 4312506					
AUTHORIZATION: Squelle le man					
COST LIMIT : \$25.00					
ORDER DATE : June 10, 2022					
ORDER TIME : 2:29 PM					
ORDER NO. : 737317-020					
CUSTOMER NO: 4312506					
CHANGE OF AGENT					
NAME: 83RD STREET ALF, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker					

EXAMINER'S INITIALS:

*

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.

(a)	8415 E. 21st Street North	(b) 8415 E.	21st Street North
. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 100	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Suite 100	
	Wichita, KS 67206	Wichita,	KS 67206
	October 10, 2019	M1900000	9628
	Date of filing/registration in Florida	4.	Document number
5. (a)	Registered Agent and Registered Office shown on the records of Cross Street Corporate Services LLC	the Florida Dept, of Sta	te:
	Registered Office Address (MUST BE FLORIDA STREET) 200 S. Orange Avenue	4DDRESS)	_
	Sarasota . FL	34236	_
(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address:	Office address:	FILED 2022 JUNIO AM 8: 5 SECRETARY OF STATA ALLAHASSEE, FLICA
	Tallahassee, FL	32301	_ ::: 5
nange gent w as/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liaker authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered office an ability company, it is if the limited liabilit	d the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
/s/	Mary Ellen Pisanelli	Mary Ellen Pisa	anelli, Authorized Person
Signat	ure of a member or authorized representative of a member		Printed or typed name of signee
heret. rovisie	ov accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I h	ee to act in this cap performance of my I for in Chapter 603	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed.

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