## M190000011110

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





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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

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: February 13, 2020

Order#: 171299-006

Re: PENSACOLA SOUTHTOWNE OWNER LLC

Enclosed please find:

XX 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: Erika Zavala Daza 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.

1.	Na	me of the limited liability company: PENSACOLA SC	OTHTO	MNE OM	NER LLC		
2.	(a)	400 LOCUST ST, STE 790	(b)		OCUST ST, STE 790		
		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_		failing address of limited liabil (Note: MAY BE POST OFF	- •	-
		DES MOINES, IA 50309	_	DES MOI	INES, IA 50309		
		11/19/2019		M1900001	11110		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	REGISTERED AGENT SOLUTIONS, INC.					
		Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State	:		
		155 OFFICE PLAZA DR.					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)				
	SUITE A						
		TALLAHASSEE, FL_	32301			~2	
	(b)	Corporation Service Company				2020 FEB	;
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office add	ress:		B 17	- 4
		1201 Hays Street				<u> </u>	1
		NEW Registered Office Address:					الثعبير ا
				<del> </del>	reserved to the second	42	
		Tallahassee .FL	32301				
the ag wa the	e cha ent v as/we e arti	mited liability company is not organized under the law nge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited lial tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member or authorized representative of a member	s of the s the regist bility con the limi imited li	ered office mpany, it is ted liability ability com	e and the business office of shereby confirmed that the company or as otherwish apany.  Trized Person	of the re ne chang e provid	egistered ge(s)
	Signat	ure of a member or authorized representative of a member			Printed or typed name of sign	ce	
pr the to no	ovisi e obl mere stifiec	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I have I in writing of this change.	ve to act performa for in C erehy co	in this cape nce of my c hapter 605 nfirm that i	acity. I further agree to c duties, and I am familiar , F.S. Or, if this documen the limited liability compo	omply with an out is being any has	with the d accept ing filed been
Si	人 gnatu	Transaction Service Company	BY: Gr	ace E. Kir	by, Asst. Vice Presiden	ıt	

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