© 07/20/2023 12:56 PM 7/20/23, 3:55 PM	14154847068	→ 18506176383 Division of Corp	orations		pg 1 of 2
M	60	da Degationent of Division of Corporation curonic Filing Covers	ns	34	5
Note: 1		e and use it as a cover sh ne top and bottom of all pa			-
		(((H23000254123 3)))		
		H230002541233ABCW			
Note:		RESH/RELOAD button of will generate another co		om this page.	
T		Corporations : (850)617-6383			
F	rom: Account Name Account Numb Phone Fax Number	ber : 110432003053 : (561)694-8107			
		for this business en gs. Enter only one em		ease	
	LLC RE	GISTERED AGENT JCBRFL001 LLC	CHANGE	بر المراجع الم المراجع المراجع المراجع مراجع المراجع ال	• C.
RFC 2003 JUL 2	Certificate of		0	ינ ט ט	
	Certified Cop Page Count	<u>у</u>	0		
	Estimated Ch	arge	\$25.00		

Help

אר **גו גטג**ז ד' רבשובחא

→ 18506176383

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)	30 N LaSalle St	((b) 30 N LaSalle St
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company (<u>Note: MAY BE POST OFFICE BOX</u>)
	Ste 4140		Ste 4140
	Chicago, IL 60602		Chicago, IL 60602
	05/29/2020		M2000004845
	Date of filing/registration in Florida	4.	Document number
(a)	CT CORPORATION SYSTEM		
	- Depictory Appended Depictored Office shows on the meaning	. Cal El . 14	
	Registered Agent and Registered Office shown on the records	of the Plone	da Dept. of State:
	Registered Agent and Registered Office Shown on the records		
			<u></u> <u></u>
	Registered Office Address (MUST BE FLORIDA STREE 1200 S PINE ISLAND RD		<u></u>
(b)	Registered Office Address (MUST BE FLORIDA STREE 1200 S PINE ISLAND RD	T ADDRES	<u></u>
(b)	Registered Office Address (MUST BE FLORIDA STREE 1200 S PINE ISLAND RD PLANTATION	<u>T ADDRES</u> FL	55)
(b)	Registered Office Address (MUST BE FLORIDA STREE 1200 S PINE ISLAND RD PLANTATION	<u>T ADDRES</u> FL	<u>عمط dress</u> :
(Ե)	Registered Office Address (MUST BE FLORIDA STREE 1200 S PINE ISLAND RD PLANTATION	<u>T ADDRES</u> FL	5551
(Ե)	Registered Office Address (MUST BE FLORIDA STREE 1200 S PINE ISLAND RD PLANTATION	<u>T ADDRES</u> FL	عمل المحمد

agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Tymberlyn Tesfay Signature of a member or authorized representative of a member

Tymberlyn Teefey, Attorney-in-Fact

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or. if this document is being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

Tymberlyn Teefey, Special Secretary

Tymberlyn Teefey Signature of Registered Secont

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