## Division of Corporations Electronic Filing Cover Sheet

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(((H210004224213)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

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## LLC REGISTERED AGENT CHANGE **ETXETLLC**

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November 15, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ETXE I LLC 200 S BISCAYNE BLVD SUITE 600 MIAMI, FL 33131US

SUBJECT: ETXE I LLC REF: M20000008283

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Agnes Lunt FAX Aud. #: H21000418106 Regulatory Specialist III Letter Number: 221A00027669 To: 18506176383 From: 12147128131 Date: 11/15/21 Time: 11:28 PM Page: 03/03

(((H21000422421 3)))

## 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	Same of the limited liability company: ETXETLLC			
2. (a	)		(b)	
,	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)
	200 S BISCAYNE BLVD, SUITE 600		200 S BIS	CAYNE BLVD, SUITE 600
	MIAMI, FL 33131	_ <del></del>	MIAMI, F	7. 33131
	09/22/2020		M20000008	3283
3.	Date of filing/registration in Florida	4.		Document number
5. (a	.,			
٠, (د	Registered Agent and Registered Office shown on the records of AGI REGISTERED AGENTS, INC.	of the Flori	ida Dept of Stat	·
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		11. 12. 1	
	1000 Brickell Ave., Suite 300			E IL 2021 NOV 16 SECRETARY ALLAHASSE
	Miami . I	FL_33131		
(b	,			OF STA
(1)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office	address	
	LEGALINC CORPORATE SERVICES INC.	·		_
	NEW Registered Office Address			
	5237 SUMMERLIN COMMONS BLVD, SUITE 400			_
	FORT MYERS,	FL_33907		<del></del>
chan agen was/ the a	Elimited liability company is not organized under the lege or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of the	he registe liability s of the l	ered office an company, it i imited liabilit	s hereby confirmed that the change(s) ty company or as otherwise provided in
(	Jassica Kovar hatture of a member or authorized representative of a member	Je	ssica Kovar, A	Authorized Representative
I he proving the or notif	Nature of a member or authorized representative of a member reby accept the appointment as registered agent and a issions of all statutes relative to the proper and comple bligations of my position as registered agent as providerely reflect a change in the registered office address and in criting of this change.	gree to a te perfor ded for it I hereby	nct in this cap mance of my i Chapter 60; confirm that	Printed or typed name of signee pacity. I further agree to comply with the dities, and I am jamiliar with and accept 5. F.S. Or, if this document is being filed the limited liability company has been