Division of Corporations

2022-08-29 11:43:13 PDT

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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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.

Na	me of the limited liability company: CNL STRATEG	C ASSET II	NVESTMEN	NT, LLC			
(a)	No Change	(b) No Change					
(**)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX				
	12/07/2020		2000001128	84			-
	Date of filing/registration in Florida	- _{4.} -	[]	Document nur	nber		-
(a)	FURMAN, RYAN						
(b)	Registered Agent and Registered Office shown on the records of	the Florida D	Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)			SEC	2022 AUG ,	
	450 S ORANGE AVENUE					AU	7
	ORLANDO FL	32801			景点	3 29	
	C T Corporation System				WRY OF STANKER	AM	щ
	Enter name of NEW Registered Agent and/or NEW Registered	Officenddre	ess:			.6 H	Ö
					J.K.	: 19	
	NEW Registered Office Address:						"
	1200 South Pine Island Road						
	Plantation	33324					
•				italia de factoria.	h	مما مارم	a frau
cha	imited liability company is not organized under the lay nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li	f the registo	ered office a	and the busin	ess office of	of the re	egistered
:/w(ere authorized by an affirmative vote of the members of organization or the operating agreement of the	of the limit	ed liability	company or a	as otherwis	e provi	ded in
(2	cres of organization of the operating agreement of the		AVIS, MAS	_			
gna	tine of a member of authorized representative of a member		1	Printed or typed	name of sign	iec	
ovisi nere lified Mich	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete igutions of my position as registered agent as provided reflect a change in the registered office address, I fin writing of this change. CT Corporation System CLL Holden.	e ererterrinien	9752 OL MIN' 7H	unes ana lai	ot Iamillar	wun au	aacccr