## M21000001754

(Requestor's Name)
(Address)
(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.
Office Use Only
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700417269627

S. CHATHAIA

2023 NOV -8 AM 10: 09 2023 NOV -8 PM 4: 32

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:1	1/08/2023	
	Juliana	
	2128432	
	HR RI	EALIZED IV LLC
Amenda	of Incorporation/Authorizat ment of Agent	on to Transact Business
☐ Reinsta		
Merger		
Fictitiou	tion/Withdrawal	
	ount: \$25.00	

V

## 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.

i. Na	me of the limited liability company:HR REAL	IZED I	V LLC					
2. (a)		(h	1					
2. ()	Principal office address of limited liability company:  ( <u>Note: MUST BE STREET ADDRESS</u> )	,,		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)				
	No Change			No Change				
	2/8/2021	_		M21000001754				
3.	Date of filing/registration in Florida	4.		Document number			•	
5. (a)	TOTTY, JEFFREY				SEC	2023		
.'. (a)	Registered Agent and Registered Office shown on the records of t	the Florida	Dept. of State	· :		8- AON E202		
	3020 Hartley Road				全至	٧ -	Carrier Carrier	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS	<u> </u>		AHAS		Special Section 1	
	Unit 300				OF S	<b>A</b>		
	Jacksonville , FL	3205	 7		TATE	AM 10: 09		
(h)	Cogency Global Inc.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 115 North Calhoun Street, Suite 4 <u>NEW Registered Office Address:</u>		dress:					
	Tallahassee , FL	3	2301					
he cha agent w was/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regisability co of the lim	stered office impany, it is ited liability	and the business of hereby confirmed company or as oth	ffice of that the	the reg	gistered e(s)	
/s/ BI	ake Odom	Bla	ake Odom	Authorized Per	son			
-	ure of a member or authorized representative of a member			Printed or typed name	-			
l herel provisio he obli o mere totifica	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, 14 I'm writing of this change.	ree to act performed d for in C hereby co	in this cape ince of my a hapter 605 infirm that t	icity. I further agri hitics, and I am fan , F.S. Or, if this do he limited liability	ee to co niliar w ocument compar	mply w ith and is heir iy has	ith the Laccept 1g filed been	
s/ Tim	nothy Mayville							
Signatur	re of Registered Agent							