M21000004109

(Re	equestor's Name)								
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PICK-UP	☐ WAIT	MAIL							
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CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I2000000195									
REFERENCE : 01,0145 8354376									
AUTHORIZATION: Spelle de mais									
COST LIMIT : \$ 25.00									
ORDER DATE : September 15, 2021									
ORDER TIME : 5:28 PM									
ORDER NO. : 010145-011									
CUSTOMER NO: 8354376									
CHANGE OF AGENT									
NAME: INNER HARBOR 100 LLC									
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:									
CERTIFIED COPY XX PLAIN STAMPED COPY									
CONTACT PERSON: Breana Jayne EXT#									
EXAMINER:									

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: INNER HARBOR	100 LL	_C	<u> </u>				
2.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 5100 HOLABIRTD AVE	_ (t _		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 5100 HOLABIRTD AVE				
		BALTIMORE, MD 21224	_	-	BALTIMO	ORE, MD 212	24	_	
		03/19/2021		٨	M210000	04109			
3.		Date of filing/registration in Florida	4.			Document n	umber		
	` '	Registered Agent and Registered Office shown on the records of the Florida Dept. of State ARSCOTT, JOHN C Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 582 PALM WAY			e:	—itu iv	202		
		GULFSTREAM . FL	33483			_	CRET	2021 SEP 23	T)
	(b)	Enter name of NEW Registered Agent and/or NEW Registered Corporation Service Company NEW Registered Office Address: 1201 Hays Street	Office ad	<u>ddre</u>	ess:	- -	ARY OF STATE	23 M 8:55	
		Tallahassee	32301			_			
cha aga wa	ange ent w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the roll be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the liab	egistere pility co the lim mited l	d m ito ial	office an pany, it is d liability bility con	d the busines s hereby conf v company o	s office of the state of the st	of the reat the c	egistered hange(s)
— <u>s</u>	Signature of a member of a nothorized representative of a member					Printed or type		signee	
I I pro the	erek ovisio obli mere	a accept the appointment as registered agent and agree of all statutes relative to the proper and complete persons of my position as registered agent as provided by reflect a change in the registered office address. I he in writing of this change.	erforme	221	ce of mv i	acity, I furthe	er agree om tomil	- to com iar witi	h and accent
			irace E.	. K	lirby. Ass	st. Vice Presi	dent		