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	Requestor's Name)			
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PICK-UP	WAIT	MAIL		
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	ocument Number)	· · · · · · · · · · · · · · · · · · ·		
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2023 NOV 13 AM 10: 48



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 124395 8423450

AUTHORIZATION: CHIPLE COMMON

COST LIMIT : \$\frac{\chi}{2}\sigma\chi0

ORDER DATE: November 9, 2023

ORDER TIME : 9:31 AM

ORDER NO. : 124395-146

CUSTOMER NO: 8423450

CHANGE OF AGENT

NAME: SOUTHERN LITHO XIV LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland-sorenson

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	ame of the limited liability company: SOUTHERN (LITHO XIV	/ LLC			
2. (a)						
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	((b)			
	9010 STRADA STELL CT STE 103				E 103	
	NAPLES, FL 34109		NAPLES, FL 34109			
	04/21/2021		M210000	004793		
3.	Date of filing/registration in Florida	 4.	•	Document number		
5. (a)						
(=)	Registered Agent and Registered Office shown on the records of CONLEY, SEAN	of the Florid	la Dept. of St	ate:		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRES.	<u> </u>	_		
9010 STRADA STELL COURT SUITE 103 결술 중					୍ଦ୍ର ଅ ୧ ୫	
	NAPLES . F	34109		LAHE	FILE 2023 NOV 1-3	
					選って	
(b)				•	THE THE	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	ed Office ac	<u>ldress</u> :	,		
	Corporation Service Company				AN ID: 48	
	NEW Registered Office Address:			_	~	
	1201 Hays Street			_		
	Tallahassee	32301				
change agent v was/we	imited liability company is not organized under the last or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ne registere liability co of the lim	ed office ar ompany, it i uited liabili	nd the business office is hereby confirmed to ty company or as other	of the registered	
	/s/ Daniel Conley	Dar	niel Conley	, Authorized Person		
	ture of a member or authorized representative of a member		_	Printed or typed name of		
provisi the obl to mere	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address. I d in writing of this change.	e performe ed for in C hereby co	ance of my Chapter 60, onfirm that	duties, and I am fami 5, F.S. Or, if this doc the limited liability c	iliar with and accept ument is being filed ompany has been	
,	Drace C. Kirbly	GRA	CE E KIR	BY, ASST. VICE PR	ESIDENT	
Signatu	re of Registered Agent					