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A. BUTLER
JUN 30 2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 764566 8379714								
AUTHORIZATION :								
COST LIMIT : \$75.00								
ORDER DATE : June 22, 2022								
ORDER TIME : 1:41 PM								
ORDER NO. : 764566-069								
CUSTOMER NO: 8379714								
CHANGE OF AGENT								
NAME: WESTDALE BLUE LAGOON, LLC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Eyliena Baker								

EXAMINER'S INITIALS:

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.

Name of the limited liability company: WESTDALE BLUE LAGOON, LLC							
2.		2550 PACIFIC AVE STE 1600		(b)	2550 PAC	IFIC AVE STÉ 1600	
٠.	(47)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	- `	(0)		ailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		DALLAS, TX 75226	-	-	DALLAS, T	X 75226	
		07/08/2021		M	121000008	712	
3.		Date of filing/registration in Florida	4.		E	Document number 3	
5.	(a)	C T CORPORATION SYSTEM					
٥.	(a)	Registered Agent and Registered Office shown on the records of the 1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET AL	<u> </u>			Document number of 19 19 28 19 28	
		PLANTATION FL	33324				
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u> Corporation Service Company <u>NEW Registered Office Address:</u> 1201 Hays Street	<u> </u>	uui			
		Tallahassee, FL	32301				
cha age wa	inge ent w s/we	mited liability company is not organized under the laws or changes are made, the Florida street address of the re will be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	egister oility c the lir	red om nite	office and pany, it is l ed liability	the business office of the registered nereby confirmed that the change(s) company or as otherwise provided in	
/S/ Jitt Cilmi			Jill	Jill Cilmi, Authorized Person			
Signature of a member or authorized representative of a member						Printed or typed name of signee	
pro the to t not	ovisio obli mere ified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete parties of my position as registered agent as provided by reflect a change in the registered office address. I he is in writing of this change. The of Registered Agent E. Kirby, Asst. Vice President	e to ac erforn for in reby c	et ir nan Ch eon,	n this capac ce of my du apter 605, , firm that th	ity. I further agree to comply with the ties, and I am familiar with and accept F.S. Or, if this document is being filed e limited liability company has been	