To: -18506176383

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Division of Corporations



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	Account Name	: C T CORPORATION SYSTEM
	Account Number	: FCA00000023
	Phone	: (954)208-0845
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		. Conthis business action to be used for future
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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.

I. Na	me of the limited liability company:LAKE GIBSC	N OWNER, LI	LC
l. (a)	C/O CARTER & ASSOCIATES, L.L.C.	(b) ⁽	C/O CARTER & ASSOCIATES, L.L.C.
(L) .	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)
	39 GEORGE AVENUE SE SUITE 200	3	39 GEORGE AVENUE SE SUITE 200
	ATLANTA, GA 30312	#	ATLANTA, GA 30312
	10/08/2021	М	121000013276
3. 5. (a)	Date of filing/registration in Florida COGENCY GLOBAL INC	4.	Document number
). (u)	Registered Agent and Registered Office shown on the record 115 N CALHOUN ST	s of the Florida D	Dept. of State.
	Registered Office Address <u>(MUST BE FLORIDA STRE</u> STE 4	<u>ET ADDRESS)</u>	
	TALLAHASSEE	FL	2022 HAR
(b)	National Registered Agents, Inc		
(0)	Enter name of NEW Registered Agent and/or NEW Registered		
	1200 South Pine Island Road		A 🖱
	NEW Registered Office Address:		55 S
		33324	

the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Gil Patterson, CFO

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

notified in writing of this change. Denise Bell Assistant Secretary Denise Ball Bv:

Signature of Registered Agent

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00