M2100016465

(Requestor's Name)						
(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:						
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CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

CONTACT PERSON: Eyliena Baker

		ACCOUNT	NO. :	1200000	000195		
		REFERE	:NCE	116891	7143029		
		AUTHORIZAT	'ION :		<u>n</u>		
		COST LI) : MIT	54 pel 125 . 00	ena		
ORDER :	DATE :	November 7,	2022				
ORDER '	TIME :	1:23 PM					
ORDER 1	OV	116891-148					
CUSTOM	ER NO:	7143029					
	- -	- 	-				
CHANGE OF AGENT							
NAME: USLP ZETA TURNPIKE, LLC							
PLEASE	RETURN	THE FOLLOWIN	G AS P	ROOF OF F	'ILING:		
<u></u>		FIED COPY STAMPED COPY					
4141	_ I THUTH	STAMEED CORI					

EXAMINER'S INITIALS:

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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	ame of the limited liability company: USLP ZETA	TURNPIKE	E, LLC	
2. (a)	1800 Wazoo Street, Suite 500	·	o)	
c. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Denver, CO 80202			
	12/07/2021		M210000	16465
3. 5. (a)	Date of filing/registration in Florida C T Corporation System	4.		Document number
). (a)	Registered Agent and Registered Office shown on the records of 1200 South Pine Island Road	of the Florida	a Dept. of St	nte:
	Registered Office Address (MUST BE FLORIDA STREET	202 SE TALI		
	Plantation , F	L_33324		E II 2022 NOV 15 SECRETARY ALLAHASSEL
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company			
	NEW Registered Office Address:	-	-	_
	1201 Hays Street			_ _
	Tallahassee, F	32301		
:hange igent w vas/we	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	aws of the ne registere liability co	ed office a impany, it iited liabil	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in
/s/ M	ichael T. Blair	Mic	hael T. Bla	air, Authorized Person
Signat	ture of a member or authorized representative of a member			Printed or typed name of signee
provisio he obli o mere	by accept the appointment as registered agent and agens ons of all statutes relative to the proper and completing its as providing the proper and completing the proper are provided by reflect a change in the registered office address, I			
otified	or writing of this change.	Corporati	ion Servic	ce Company
Signatur	re of Registered Agent	Ami M. (Casper, A	sst. Vice President