## M22000063508

	(Requestor's Name)					
_	(Address)					
(Address)						
	·					
(City/State/Zip/Phone #)						
PICK-U	P WAIT	MAIL				
	(Business Entity Name)					
(Document Number)						
Certified Copies	Certificates of S	Status				
Special Instructions to Filing Officer:						

Office Use Only



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2023 AFR 12 AM 8: 40



Ang 10 2023

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

ACCOUNT NO	). :	1200000001	95				
REFERENC	CE :	667800	8379808				
AUTHORIZATIO	ON .	Lacera	، ر				
COST LIMI	T	\$ 25.00					
ORDER DATE : April 11, 2023	3						
ORDER TIME : 9:13 AM							
ORDER NO. : 667800-015							
CUSTOMER NO: 8379808							
	<del>-</del>		<b></b>				
CHANGE OF AGENT							
NAME: DXD F1 LAKE	E PÄRK	LLC					
PLEASE RETURN THE FOLLOWING	AS PRO	OF OF FILI	NG:				
CERTIFIED COPY  XX PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker							
	EXAMIN	ER'S INITIA	ALS:				

## STAGEMENT 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	ame of the limited liability company: DXD F1 LAKE P	ARK L	LC		
2. (a)	1718 CENTRAL AVE SW STE B		(b) 1718 CENTRAL AVE SW STE B		
(-)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ `		Mailing address of limited l	
	ALBUQUERQUE, NM 87104	_	ALBUQU	ERQUE, NM 87104	
	03/08/2022	<del></del>	M2200000	3508	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	C T CORPORATION SYSTEM				
	Registered Agent and Registered Office shown on the records of the 1200 SOUTH PINE ISLAND ROAD		•	- e: -	2
	Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>S)</u>	_	₽ ₹ 1 2023 APR
	PLANTATION , FL	33324		_	~ .
(b)	Corporation Service Company  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office as	idress:	-	AH 9: 4:0
	Corporation Service Company				. ي
	NEW Registered Office Address:			-	
	1201 Hays Street			_	
	Tallahassee , FL	32301			
change agent w was/we the arr	mited liability company is not organized under the laws or changes are made, the Florida street address of the real be identical. Or, in the case of a Florida limited liab re authorized by in affirmative vote of the members of cles of organization or the operating agreement of the liable.	register pility co the lin imited l	ed office and ompany, it is nited liability	I the business office of hereby confirmed that company or as othery	the registered the change(s)
Sign	are of a member or authorized representative of a member			Printed or typed name of s	ignee
provision the oblination of th	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.  LINDSEY M BARON ASSISTANT SECRET	erform for in ( creby co	ance of mv d	luties, and I am familia	r with and accept