Florida Department of State

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Division of Corporations

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From:

Account Name : UNITED AGENT GROUP INC.

Account Number : 120160000086 Phone : (561)508-5033 : (561)694-1639 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

govdocs@unitedagentgroup.com Email Address:

LLC REGISTERED AGENT CHANGE NETSTREIT MANAGEMENT TRS, LLC

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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.

1. ?	Name of the limited liability company: NetStreit Ma	nagei	ment TRS,	LLC	
2. (a) 2021 McKinney Avenue		as 2021 M	IcKinney Avenue	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) <u>2027 N</u>	Mailing address of limited lit (Note: MAY BE POST O	ability company:
	Ste 1150		Ste 1150		
	Dallas, TX 75201			TX 75201	
	06/21/2022		11220000	5570~	
3.	Date of filing/registration in Florida	 4.	M220000	Document number	
5. (a	Doci-town of A. A. D. D. A. D. D. A. D. D. A. D.	••		Document illimoet	
- · (=,	Registered Agent and Registered Office shown on the records of	the Flor	ida Dent of Stat		
	2894 Remington Green Lane	0.01	100 Dept. 01 5(8)	14,	
	Ragistered Office Address (MUST BE FLORIDA STREET)	ADDRE	(22)	_	
	Suite A	A	***		
	Tallahassee FL		2308	-	
(b)	United Agent Group Inc. Enter name of NEW Registered Agent and/or NEW Registered 801 US Highway 1 NEW Registered Office Address:	Office a	ddress:	-	2023 HAY 18 AM H:
	North Palm Beach				သ သ
	North Faith Beach, FL_	33	3408		
agent w was/we, the artic	mited liability company is not organized under the laws or changes are made, the Florida street address of the rill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of these of organization or the operating agreement of the liable of smember or authorized representative of a member	egister pility co the lin mited	ed office and ompany, it is nited liability liability components.	the business office of the hereby confirmed that the company or as otherwise pany. Attorney-in-Fact	e registered e change(s) e provided in
				Printed or typed name of signe	e -
provisió the oblis to merel notified	y accept the appointment as registered agent and agree ins of all statutes relative to the proper and complete per gations of my position as registered agent as provided for y reflect a change in the registered office address, I her in writing of this change.	to act erforma for in (reby co	in this capac ance of my di Chapter 605, , onfirm that th	city. I further agree to co tties, and I am familiar w F.S. Or, if this documen e limited liability compa	emply with the with and accept to being filed my has been
Kach Signature	of Registered Agent				

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