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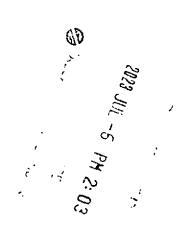


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NAME: JACKSONVILLE 3 ORANGE PARK OPCO HOLDINGS LLC

TYPE OF FILING: CHANGE OF RA

COST:

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COVER LETTER

Registration Section

TO:

INHS18 (2/14)

Divi	sion of Corporations					
SUBJECT:	JACKSONVILLE 3 ORANGE PARK OPCO HOLDINGS LLC Name of Limited Liability Company					
SUBJECT						
Dear Sir or M	Madam:					
The enclosed	d Registered Agent/Registered	d Office Change	and fe	ee(s) are submitted for filing.		
Please return	all correspondence concerni	ng this matter to	the fo	llowing:		
	Name of Person			_		
	Firm/Company			_		
				_		
	Address					
	City/State and Zip Co	ode		_		
E-mail	address: (to be used for futur	re annual report	notific	ation)		
For further i	nformation concerning this m	atter, please cal	1:			
		at (
	Name of Person			Area Code & Daytime Telephone Number		
Reg Div P.O	iling Address: gistration Section vision of Corporations D. Box 6327 lahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		
Enc	closed is a check for the follo	owing amount:				
	325 Filing Fee		□ \$ 55	5 Filing Fee & Certified Copy		

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. N	Name of the limited liability company: JACKSONVILLI	E 3 ORA	NGE PARK	OPCO HOLDINGS LLC
	r. <u></u>		(b)	
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	311 BOULEVARD OF THE AMERICAS, SUITE 404		311 BOU	LEVARD OF THE AMERICAS, SUITE 404
	LAKEWOOD, NJ 08701		LAKEWO	OOD, NJ 08701
	07/07/2022		M2200001	0477
3.	Date of filing/registration in Florida	_ 		Document number
5. (a)			
J. (a	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Sta	
	PLATINUM AGENT SERVICES LLC		• • • •	24
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRE.	<u>(S)</u>	
	1 5 OFFICE PLAZA DRIVE			
	TALLAHASSEE	32301		
	,,,,	'		
(b)				_
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	- J
	DBO Services LLC			
	NEW Registered Office Address:			_
	155 OFFICE PLAZA DRIVE			_
	TALLAHASSEE, FL	32301		_
chang agent was/w	limited liability company is not organized under the law ge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	registe bility of the li	red office an ompany, it i nited liabilit	of the business office of the registered s hereby confirmed that the change(s) by company or as otherwise provided in
	Josef Cukier	Jos	ef Cukier	
Sign	ature of a member or authorized representative of a member			Printed or typed name of signee
provis the ob to mei	eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete pligations of my position as registered agent as provided rely reflect a change in the registered office address, I he ed in writing of this change.	ee to ac perforn I for in iereby c	et in this cap nance of my Chapter 602 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
-	Devorah Glazer			
Signat	ure of Registered Agent			