M220000 18188

(R	Requestor's Name)				
(A	Address)				
(A	(ddress)				
(C	City/State/Zip/Phone #)				
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ANT WHASSEE, FLORID.



CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 900683 8419312 AUTHORIZATION : COST LIMIT : ORDER DATE: July 25, 2023 ORDER TIME : 1:43 PM ORDER NO. : 900683-002 CUSTOMER NO: 8419312 CHANGE OF AGENT NAME: ARCADIA INFRASTRUCTURE I LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Alexxis Weiland-sorenson EXAMINER'S INITIALS:

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.

١.	Na	ame of the limited liability company: ARCADIA	INFRASTRU	JCTURE I L	LC		
2	(a)	101 Main Street, Suite 300		(b)			
2.	(4)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)			Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Milford, OH 45150					
		12/07/2022		M2200001	8188		
3.		Date of filing/registration in Florida	4.		Document number		
5	(a)	C T Corporation System					
J.	(4)	Registered Agent and Registered Office shown on the record	ds of the Floric	la Dept. of Stat	te:		
		1200 South Pine Island Road					
		Registered Office Address (MUST BE FLORIDA STRI	EET ADDRES	<u>S)</u>	-		
					TAL:	202	
		Plantation	, FL33324	ļ	LAHA	2023 AUG	
					SSI SSI	8-	
((b)	Enter name of NEW Registered Agent and/or NEW Regist	tered Office a	ldress	- <u>m</u> ç	2	
		wild in the state of the state			FLO	=	
		Corporation Service Company			LORID	AM II: 3"	
		NEW Registered Office Address:) A		
		1201 Hays Street			_		
		Tallahassee	, FL		_		
cha age was	nge nt w s/we artic	mited liability company is not organized under the or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limite re authorized by an affirmative vote of the membeles of organization or the operating agreement of	the register d liability co ers of the lin	ed office and ompany, it is nited liability	d the business office of the s hereby confirmed that the y company or as otherwise	registe change	ered e(s)
/s/ Jill Cilmi			Jill Cilmi, Authorized Person				
	٠.	are of a member or authorized representative of a member			Printed or typed name of signee	_	
I h pro the to n	ereb visic obli nere	y accept the appointment as registered agent and ons of all statutes relative to the proper and compligations of my position as registered agent as provity reflect a change in the registered office address in writing of this change.	agree to act lete perform vided for in (s, I hereby co	in this cape ance of my c Chapter 605 onfirm that i	acity, I further agree to con duties, and I am familiar wi , F.S. Or, if this document the limited liability compan	nply w th and is bein y has l	ith the accept g filed seen
not	ijied (I Willing of this change.	Corporati	on Service	e Company		
Sig	natur	e of Registered Agent	Ami M. C	asper, Ass	st. Vice President		