M23000003548

(R	equestor's Name)	•			
(A	ddress)				
V.	33.013,				
(Address)					
(Ĉi	ity/State/Zip/Phone #)				
·					
PICK-UP	☐ WAIT	MAIL			
(Bi	usiness Entity Name)				
(3)	auticos Etally (Marilo)				
(Do	ocument Number)				
Certified Copies	Certificates of	of Status			
· ———					
Special Instructions to Fili	ing Officer:				

Office Use Only

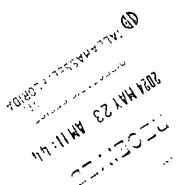


900429989319

LLC RAGIRO Change



A. RAMSEY MAY OY 2024



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

	ACCOUNT NO.	:	12000000	0195			
:		:	459862	8445027			
	AUTHORIZATION	:	-(1	<i>3</i>			
	COST LIMIT	:	\$ 35.00	William .			
ORDER DATE :							
ORDER TIME :	3:20 PM						
ORDER NO. :	459862-244						
CUSTOMER NO:	8445027						
							
CHANGE OF AGENT							
NAME GODD IDD INGLE DE LEG							
NAME: GSPP JEA INGLE FL, LLC							
PLEASE RETURN	THE FOLLOWING AS	PR	OOF OF FT	LING:			
	FIED COPY						
	STAMPED COPY						
CONTACT PERSO	N: Amanda Miller						

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.

1.	Na	une of the limited liability company: GSPP JEA INGL	E FL I	I, L	LC	
	(a)			(b)		
	(/	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_	(-)	, N	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1 LANDMARK SQUARE, SUITE 320			1 LANDMA	ARK SQUARE, SUITE 320
		STAMFORD, CT 06901	_		STAMFOR	RD, CT 06901
		03/20/2023		N	л 23000003	548
3.		Date of filing/registration in Florida	4.	-]	Document number
5.	(a)					~
	(")	Registered Agent and Registered Office shown on the records of the VCORP SERVICES, LLC		da l	Dept. of State:	ARAMAY 23 PAIR 1
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					1 2 T
		1200 SOUTH PINE ISLAND ROAD				2 V
		PLANTATION	33324			No.
	(b)					·
		Enter name of NEW Registered Agent and/or NEW Registered (Office a	ıdd	ress:	
		Corporation Service Company				
		NEW Registered Office Address:				
		1201 Hays Street				
		~				
		Tallahassee FL_	32301			
cha aga wa	ange ent v is/we	imited liability company is not organized under the law or changes are made, the Florida street address of the rivill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability.	registe bility of the li	red on mit	l office and ipany, it is ed liability	the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
		Xia E. alnie	JIL	_L [†]		HORIZED PERSON
	-	ure of a thember or authorized representative of a member				Printed or typed name of signee
pre the to no	herel ovisi obli mere tified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I ha I in writing of this ohange.	e to ac perform for in ereby c	et i nar Cl. con	n this capac ace of my di apter 605, firm that th	city. I further agree to comply with the uties, and I am familiar with and accept F.S. Or, if this document is being filed be limited liability company has been
Sig	gnatui	Marco Tokuble re of Registered Agent	GRAC	ΕF	E. KIRBY.	ASST. VICE PRESIDENT