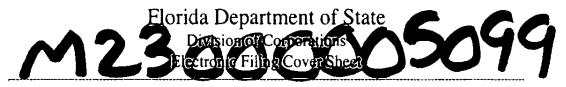
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## LLC REGISTERED AGENT CHANGE CASCADE RESIDENTIAL SERVICES LLC

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Certified Copy	0
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APR 30 2024 K. Brumbley

## 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	ame of the limited liability company: CASCADE RESI	DENT	IAL	SERVICES LLC					
2. (a)	2021 MCKINNEY AVENUE, SUITE 1200		(b) 2021 MCKINNEY AVENUE, SUITE 1200						
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  Dallas, TX 75201			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  Dallas, TX 75201					
		_							
	12/18/2023	<del></del>	i	M23000005099					
3.	Date of filing/registration in Florida	4.		Document num	ber				
5. (a)	C T CORPORATION SYSTEM								
J. (4)	Registered Agent and Registered Office shown on the records of	the Flor	rida I	Dept. of State:					
	1200 SOUTH PINE ISLAND ROAD								
	Registered Office Address (MUST BE FLORIDA STREET)	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)							
	PLANTATION	33324							
	, FL				2024 APR				
(b)	United Agent Group Inc.								
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office add			<u></u>	2) 2) 6				
	801 US Highway 1				P				
	NEW Registered Office Address:								
					-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-				
	North Palm Beach	33408							
	, FL	33400	. <del></del>						
change agent was/w	limited liability company is not organized under the law e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	regist ability of the l	ered con imit	d office and the business of npany, it is hereby confirm ted liability company or as	ffice of the registered led that the change(s)				
Cu	Evin Law			Law, Attorney-in-Fact					
Signa	sture of a member or authorized representative of a member	_		Printed or typed na	ame of signee				
provisa the obt to mer	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I l d in writing of this change.	ree to a perfor d for it hereby	ict i mar n Ch cor	n this capacity. I further a nce of my duties, and I am hapter 605, F.S. Or, if this nfirm that the limited liabil	gree to comply with the Jamiliar with and accept document is being filed ity company has been				
Cue	in Law Special S	ecreta	n,						

Signature of Registered Agent