

MZ3 000000 8333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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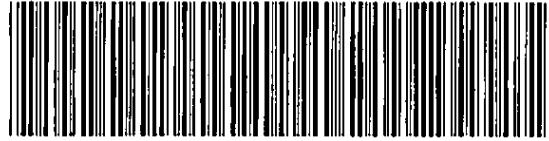
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLOR.

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 974742 8426281

AUTHORIZATION :

[Signature]

COST LIMIT : \$ 25.00

ORDER DATE : September 7, 2023

ORDER TIME : 1:50 PM

ORDER NO. : 974742-215

CUSTOMER NO: 8426281

CHANGE OF AGENT

NAME: GIA BTR01, LLC

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PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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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.

1. Name of the limited liability company: <u>GIA BTR01, LLC</u>	
2. (a) <u>1221 Brickell Ave., Ste 900</u> Principal office address of limited liability company: <i>(Note: MUST BE STREET ADDRESS)</i> <u>Miami, FL 33131</u>	(b) <u>1221 Brickell Ave., Ste 900</u> Mailing address of limited liability company: <i>(Note: MAY BE POST OFFICE BOX)</i> <u>Miami, FL 33131</u>
3. <u>06/27/2023</u> Date of filing/registration in Florida	4. <u>M23000008333</u> Document number
5. (a) <u>CSC Global Solutions, Inc.</u> Registered Agent and Registered Office shown on the records of the Florida Dept. of State: <u>155 Office Plaza Dr., 1st Floor</u> Registered Office Address <i>(MUST BE FLORIDA STREET ADDRESS)</i> <u>Tallahassee</u> , FL <u>33131</u>	
(b) <u>Enter name of NEW Registered Agent and/or NEW Registered Office address:</u> <u>Corporation Service Company</u> <u>NEW Registered Office Address:</u> <u>1201 Hays Street</u> <u>Tallahassee</u> , FL <u>32301</u>	

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TALLAHASSEE, FL

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Camilo Salomon
Signature of a member or authorized representative of a member

Camilo Salomon
Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Alexis Wilard-Janson, ACP
Signature of Registered Agent