	(Requestor's Name)	
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	<b>,</b> , , ,	
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A. BUTLER SEP 3 0 2022 CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 965064 8387948

AUTHORIZATION :

COST LIMIT

ORDER DATE: September 21, 2022

ORDER TIME : 8:50 AM

ORDER NO. : 965064-146

CUSTOMER NO: 8387948

## CHANGE OF AGENT

NAME: GORDON BROTHERS RETAIL

PARTNERS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX \_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Eyliena Baker

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	me of the limited liability company: GORDON BRO	THERS	RETAIL PAI	RTNERS, LLC	
2. (a)	C/O GORDON BROTHERS GROUP, LLC		(b) C/O GORDON BROTHERS GROUP, LLC		
(4) -	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			_	f limited liability company: E POST OFFICE BOX)
	Prudential Tower, 800 Boylston Street, 27th Floor		Prudentia	l Tower, 800 B	oylston Street, 27th Floor
	BOSTON, MA 02199		BOSTON, MA 02199		
	06/09/1998		M9800000	0603	
3.	Date of filing/registration in Florida	4.		Document nur	nber
5. (a)	C T CORPORATION SYSTEM				
	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of State	<del>-</del> e:	
	1200 SOUTH PINE ISLAND ROAD			20	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		-	2022 SEP	
	PLANTATION, FI	33324		_	D (1987)
(b) _	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> Corporation Service Company <u>NEW Registered Office Address:</u>	l Office a	ddress:	-	MM 9: 32
	1201 Hays Street				
	1201 Flays Silect			_	
	Tallahassee, FI.	32301	<u>-</u>	_	
change agent w was/we	mited liability company is not organized under the law or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited lia- are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registe ability c of the lii	red office and ompany, it is nited liability	d the business of thereby confirm y company or a	office of the registered med that the change(s)
	/S/ Jill Cilmi		Jill Cilmi, Authorized Representative		
Signat	ure of a member or authorized representative of a member			Printed or typed	name of signee
provisie the obli to mere notifieq	ny accept the appointment as registered agent and agrons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. It is writing of this change.	ee to ac perforn d for in hereby c	t in this cape ance of my a Chapter 605, onfirm that t	wity, I further luties, and I an , F.S. Or, if th he limited liah	agree to comply with the a familiar with and accept is document is being filed ility company has been
_	Kirby, Asst. Vice President				

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