I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MANAGER

SIGNATURE: STANLEY E. THOMAS

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# M06000004354

Entity Name: FOURTH QUARTER PROPERTIES 129, LLC

Current Principal Place of Business:

45 ANSLEY DRIVE NEWMAN, GA 30263

Current Mailing Address:

45 ANSLEY DRIVE NEWMAN, GA 30263

FEI Number: 37-1526121

Name and Address of Current Registered Agent:

BOONE, STEVE 1001 AVENIDA DEL CIRCO 1001 AVENIDA DEL CIRCO VENICE, FL 34285 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: STEVE BOONE

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

TitleMGRNameTHOMAS, STANLEY EAddress45 ANSLEY DRIVECity-State-Zip:NEWMAN GA 30263

Certificate of Status Desired: No

01/25/2016 Date

FILED Jan 25, 2016 Secretary of State CC5687187074

Date

01/25/2016