## LU5000 118017

(R	equestor's Name)						
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates	of Status					
Special Instructions to Filing Officer:							





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07/15/16--01007--018 \*\*25.00

JUL 18 2016 S. YOUNG

## **COVER LETTER**

TO:	Registration Section Division of Corporations						
SUBJI	ECT: A-I HOLDINGS SR70H, LLC						
Name of Limited Liability Company							
Dear S	ir or Madam:						
The er	nclosed Registered Agent/Registered Offic	ce Change and	fee(s) are submitted for filing.				
Please	return all correspondence concerning this	s matter to the	following:				
Kevir	n M. Carroll, President and CEO						
	Name of Person		_				
Lang	Management Company, Inc.						
	Firm/Company		_				
790 F	Park of Commerce Boulevard, Suite	≥ 200					
	Address						
Boca	Raton, Florida 33487						
	City/State and Zip Code		<del></del>				
webr	master@langmanagement.com						
	E-mail address: (to be used for future annu	al report notif	ication)				
For fu	rther information concerning this matter,	please call:					
Kevir	n M. Carroll	561	750-8800				
	Name of Person		Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Di P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314				
Enclosed is a check for the following amount:							
	<b>☑</b> \$25 Filing Fee	□ \$5	55 Filing Fee & Certified Copy				

TALLAHASSEE FLORIG

## 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: A-I HOLDINGS	SR7	0H, LLC			
2. (a)						
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			ny:	
	790 Park of Commerce Boulevard, Suite 200		790 Parl	k of Commerce Blvd	. Suite 2	200
	Boca Raton, Florida 33487	:	Boca Ra	iton, Florida 33487		
	12/9/05		L0500011	18017		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	William K. Isaacson					
· ( <del>"</del> )	Registered Agent and Registered Office shown on the records of the	Florid	Dept. of State	2:		SA
	William K. Isaacson				ر 15	ECR ECR
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 21045 Commercial Trail				JUL 15	HASSE
	Boca Raton p. 3	3486		•	PM 12:	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice ad	dress:		38	ORIDA
	NEW Registered Office Address:					
	790 Park of Commerce Boulevard, Suite 200					
	Boca Raton , FL 3	3487	·-····			
the cha agent v was/we the arti Signa I here provisi the obl	imited liability company is not organized under the laws unge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of acles of organization or the operating agreement of the limiture of a member or authorized representative of a member by accept the appointment as registered agent and agree is one of all statutes relative to the proper and complete points of any position as registered agent as provided if the proper and complete of the proper and comple	ne regiility conthe line mited  Willes to ac	stered office ompany, it is nited liability liability con liam K. Isa	e and the business office is hereby confirmed that by y company or as otherwingany.  BACSON  Printed or typed name of signature.  If further agree to	of the reg the chang se provid	gistered e(s) ed in

Signature of Registered Agent