L/000004504

* · · ·					
(Requestor'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:					

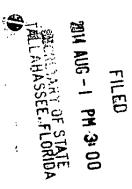
Office Use Only



800262743758

08/01/14--01016--015 **25.00

Change



AUG 13 2014

COVER LETTER

TO: Registration Section Division of Corporations	•						
SUBJECT: MHPI I, LLC							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office	e Change and fee(s) are submitted for filing.						
Please return all correspondence concerning this	matter to the following:						
NORA H. MILLER, ESQ.							
Name of Person							
RAILEY, HARDING & ALLEN, P.A.							
Firm/Company							
15 N. EOLA DRIVE							
Address							
ORLANDO, FL 32801							
City/State and Zip Code							
NMILLER@RAILEYHARDING.COM							
E-mail address: (to be used for future annu-	al report notification)						
For further information concerning this matter, p	elease call:						
NORA MILLER	407 648-9119						
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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:							
2 \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy						
INHS18 (2/14)							

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.

	ame of the limited liability company:					
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)) <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	510 GATLIN AVE			РО ВО	X 560219	
	ORLANDO, FL 32806	<u> </u>		ORLAN	DO, FL 32856	
	01/12/2010			L100000	04504	
3,	Date of filing/registration in Florida	4.	•		Document number	
5. (a)						
ν. (ω)	Registered Agent and Registered Office shown on the records a MHP PORTFOLIO, LLC	f the Flor	ida	Dept. of Sta	te:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	800 N. MAGNOLIA AVENUE - STE. 1500			AUG -		
,	ORLANDO , F	L_3280)3		SE SE	
(h)					<u> </u>	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				STAJE FLORIDA	
	RAILEY, HARDING & ALLEN, P.A.					
	NEW Registered Office Address:				_	
	15 N. EOLA DRIVE			<u> </u>	_	
	ORLANDO, I	L 328	01			
the chagent was/v	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the memberaticles of organization or the operating agreement of the	aws of of the re liability of the ne limit	the egi co lin	stered offic ompany, it nited liabil liability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
Sign	nature of a member or authorized representative of a member	<u>-</u>	10	ALIAN IAHIFI	Printed or typed name of signee	
I her provi. the oi to me notifi	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provi- rely reflect a change in the registered office address, ed in writing of this change.	gree to le perfo led for I hereb	ac rn in y c	t in this ca lance of m Chapter 60 confirm tha		