Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please.

Email Address:

LLC REGISTERED AGENT CHANGE VINTAGE ESTATE HOMES LLC

Certificate of Status	0
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Corporate Filing Menu

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COVER LETTER

TO: Registration Section Division of Corporations						
VINTAGE ESTATE HOMES LLC SUBJECT:						
Name of Limited Liability Company						
Dear Sir or Madam:						
The enclosed Registered Agent/Registered Office	ce Change and fee(s) are submitted for filing.					
Please return all correspondence concerning this	s matter to the following:					
Alicia Richards						
Name of Person						
Registered Agent Solutions, Inc.						
Firm/Company						
Corporate Center One, 5301 Southwest Pkwy, Ste 40	00					
Address						
Austin, TX 78735						
City/State and Zip Code						
E-mail address: (to be used for future annu	ual report notification)					
For further information concerning this matter, p	please call:					
Alicia Richards	888 705-7274					
Name of Person	Area Code & Daytime Telephone Number					
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303					
Enclosed is a check for the following a	amount:					
☐ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					
INHS18 (2/14)						

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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.

L Na	ame of the limited liability company: VINTAGE EST	ATE H	OMES LLC	
2. (a)	1717 McKinney		(b) 1717 Mel	Kinney
e. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Suite 1000		Suite 1000	0
	Dallas, TX 75202		Dallas, T	X 75202
	6/14/2012		1.12000079	207
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	CORPORATION SERVICE COMPANY			
(u)	Registered Agent and Registered Office shown on the records of 1201 HAYS STREET	f the Flo	rida Dept, of Sta	
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)	F1L1 205 0CT 21 25 25 25 25
	TALLAHASSEE FI	L 3230	1	
(b)	Registered Agent Solutions, Inc.			ANO: 09
	Enter name of NEW Registered Agent and/or NEW Registered Office address.		99 O	
	1200 South Pine Island Road			·
	NEW Registered Office Address:			_
	Plantation	3332	1	- - -
change agent v was/wa	imited liability company is not organized under the la corchanges are made, the Florida street address of the will be identical. Or, in the case of a Florida limited li- ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	e regis ability of the	tered office an company, it i limited liabilit	id the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
<u>151</u>	Mich Harbur	N	tick Harbur	Authorized Representative
-	ture of a member or authorized representative of a member			Printed or typed name of signee
provisi the obl to mer	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to perfoi d for i hereby	act in this cap rmance of my n Chapter 60; confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
P	Mackenzie Hibler, Asst. Secre	etary		
Signatu	re of Registered Agent			