L14000081445

(Requestor's Na	ime)			
(Address)				
(Address)				
(City/State/Zip/F	Phone #)			
PICK-UP WAI	T MAIL			
(Business Entity	/ Name)			
(Document Number)				
Certified Copies Certifi	cates of Status			
Special Instructions to Filing Officer:				

Office Use Only



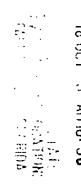
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T. CLINE

OCT -8 JUNE

EXAMINER



CORPORATION SERVICE COMPANY

1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 425057 7586636					
AUTHORIZATION: Symula de man					
COST LIMIT : \$ 25.00					
ORDER DATE: October 4, 2018					
ORDER TIME : 4:45 PM					
ORDER NO. : 425057-075					
CUSTOMER NO: 7586636					
0.					
CHANGE OF AGENT					
name: TLE AT MIAMI-KENDALL, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Emily Croft EXT# 62925					

EXAMINER:

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.

2. (a))		0)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	210 Hillsboro Technology Drive		210 Hillsboro Technology Drive	
	Deerfield Beach, FL 33441		Deerfield Beach, FL 33441	
	05/20/2014		L14000081445	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)FALDUTO, MARY			
	Registered Agent and Registered Office shown on the record	ls of the Florida	i Dept. of State:	
	Regis wred Office Address (MUST BE FLORIDA STRE	ET ADDRESS		
	210 Hillsboro Technology Drive		 	
	Deerfield Beach	, FL <u>33441</u>	· 号	
(b)	Corporation Service Company Enter name of <u>VEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Office ado	ldress:	
			l <u>drev</u> : ယ	
	1201 Hays Street		" σ .	
	NEW Registered Office Address:			
	Tallahassee	, FL <u>32301</u>	<u>l</u>	
the ch	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 limite were authorized by an altimized vote of the member ticles of organization or the apprairie agreement of	ss of the regised liability co	stered office and the business office of the registe ompany, it is hereby confirmed that the change(s)	
		Mich	hael Shafir, Secretary	
•	ature of a member or authorized representative of a member		Printed or typed name of signee	,
provis the ob- to me	eby accept the appointment as registered agent and sions of all statutes relative to the proper and comp oligations of my position as registered agent as pro- vely reflect a change in the registered office address addin writing of this change.	vided for in C	iance of my duties, and I am familiar with and acc Chapter 605, F.S. Or, if this document is being fil	epi ed
	Klylanni chenu		Roxanne Turner	
Signat	ure of Registered Agent Corporation Service Compar	nv BY:	Asst. Vice President	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00