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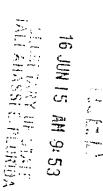
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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.

1.	Na	me of the limited liability company: KH Peachtree F	unding L	LC	COMPANIES OF THE STATE OF THE S			
2 ('à Y	701 South Olive Avenue	(b)	701 Sou	ith Olive Avenue.			
۷. (. P.Z.	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compa <i>(Note: MAY BE POST OFFICE BOX)</i>				
		Suite 104		Suite 104				
		West Palm Beach FL 33401		West Pair	n Beach, FL 3340	1	1.0.11.11	
		07/10/2015		L15000119	9275	_		
3.		Date of filing/registration in Florida	4.	1	Document number	•		
5.	(a)	Jared A Stark						
-	()	Registered Agent and Registered Office shown on the records of i	he Florida	Dept. of State:				
		701 South Olive Avenue				<u> </u>		
		Registered Office Address (MUST BE FLORIDA STREET)		- E	16 J			
		Suite 104					JUNI	٠.
		West Palm Beach , FL	33401			13. E	C)	t to the
((b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	Office add	TOP C C*			AK 9:5	
		Eller hanc of the state of the	TYTITE HELD	1.0.1.37			ယ	
		1201 Hays Street						
		NEW Registered Office Address:						
		Tallahassee , FL	32301					
the age: was	cha nt v s/wa	imited liability company is not organized under the lavinge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited liacre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis ability co of the lim	tered office mpany, it is ited liability ability com	and the business of hereby confirmed company or as off pany.	office of that the	f the re c chang	gistered (c(s)
	<u>\</u>			W:IIV	<u>am Johns</u>	<u> به د</u>		r
I he pro the to it not	ere visi obi ner ifig	ture of a member of authorized representative of a member by accept the appointment as registered agent and aground of all statutes relative to the proper and complete ligations of my position as registered agent as providedly reflect a change in the registered office address, I if in writing of this change.	performe d for in C hereby co	in this capa nice of my a chapter 605, nfirm that t	Printed or typed name icity. I further agr luties, and I am fai F.S. Or, if this do he limited liability	ree to co miliar v ocumen ocompa	omply v with and t is bein ny has	vith the I accept ng filed been
31£		re of Registered Agent Corporation Service Company	טיים.	acc L. Kill	by, Assistant Vic	o i icai	wiit	

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