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	To:				
		Division of Corporations			
		Fax Number : (850)617-6383	i e		
	From:				
		Account Name : REGISTERED AG	ENT SOLUTIONS INC	٠.	
		Account Number : I20100000062		hed be	
		Phone : (888)705-7274		<u> </u>	
		Fax Number : (888)706-7274	L	77	
	<pre>**Enter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please.**</pre>				
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_	CO 🚟 Em	ail Address:		<u></u>	
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-	Z020 OCT 23 PM	LLC REGISTERED AGENT CHANGE TLE AT WINDERMERE, LLC			
		Certificate of Status	0		
9	202	Certified Copy	0		
		Page Count	01		
		Estimated Charge	\$25.00		

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Corporate Filing Menu

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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: TLE at Windermere, LLC

15129570210

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Castillo				
Name of Person				
Registered Agent Solutions, Inc.				
Firm/Company				
1701 Directors Blvd, Suite 300				
Address				
Austin, TX 78744				
City/State and Zip Code				

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Castillo

at (

705-7274

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:

□ \$25 Filing Fee

■ \$55 Filing Fee & Certified Copy

INHS18 (2/14)

15129570210

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. 1	1. Name of the limited liability company: ILE at VVIndermere, LLC					
2. (a	6290 LAKE SMITH CIRCLE		RO TECHNOLOGY DRIVE			
- (-	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) WINDERMERE, FL 34786	Mailing a (<u>Note:</u>	ddress of limited liability company: MAY BE POST OFFICE BOX D BEACH, FL 33441			
	5/12/2016	L1600009	3647			
 3. 5. (Date of filing/registration in Florida a) RICH, SAMANTHA	4. Docum	nent number			
	Registered Agent and Registered Office shown on the records of 210 HILLSBORO TECHNOLO Registered Office Address (MUST BE FLORIDA STREET)	OGY DRIVE	१८५७			
	DEERFIELD BEACH ,FL	33441	53 53			
(1	Registered Agent Solutions, Enter name of NEW Registered Agent and/or NEW Registered	·	9:			
	155 Office Plaza Dr.	, , , , , , , , , , , , , , , , , , ,	C			
	NEW Registered Office Address: Suite A					
	Tallahassee	32301				
If the	e limited liability company is not organized under the lay	ws of the State of Florida, it	is hereby confirmed that after			

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Richard Weissman

Richard Weissman Manager

Signature of a member or authorized representative of a member

Mackenzie Hart, Asst. Secretary

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Mockey of Registered Agent