Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

Fax Number

: (852)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (614)280-3338 Phone

Fax Number : (954)208-0845

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

Email Address:_

LLC REGISTERED AGENT CHANGE ICON KEYSTONE ICP II OWNER POOL 5 SOUTH FL, LLC

Certificate of Status Certified Copy 1 age Count

Estimated Charge \$55.00

Electronic Filing Menu Corporate Filing Menu

Help

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,

. Na	me of the limited liability company:	ICON KEYSTONE ICP II OWNER POOL 5 SOUTH FL, LLC						
!. (a)	Two North Riverside Plaza Suite 2350							
()	Principal office address of limited fiability (Note: MUST BE STREET ADD		. (17)		dailing address of limited liability company: (Note: MAY BE POST OFFICE BON)			
	Chicago, IL							
	60606							
	11/4/2003		M	103000003	713		•	
	Date of filing/registration in Fl	orida	→ . —		Document n	umber		
, (a) (b)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State CORPORATION SERVICE COMPANY				- ::		2018 NOV 15	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201 HAYS STREET					NE SARY OF STATE AHASSEEL FLORID		 i
	TALLAHASSEE	, FL_	32301		AH 9:			<u> </u>
	Enter name of NEW Registered Agent and/or NEW Registered Office address: C T Corporation System					0/. [.	42	
	NEW Registered Office Address:							
	1200 South Pine Island Road							
	Plantation	, FL	33324					
ie cha gent v as/we	imited liability company is not organized age or changes are made, the Florida str will be identical. Or, in the case of a Florida are authorized by an affirmative vote of cles of organization or the operating agr	eet address of rida limited lia the members o	the registed bility comes the timited in the time.	ered office apany, it is ed liability	e and the busi s hereby cont y company or	iness offici irmed the	ce of that the	e registere lange(s)
	Egyforn ffer n.		Stepha	nie Boehm			<u> </u>	
l herel provisi he obl o mere lotifico	we of a member or authorized representative of a by accept the appointment as registered ons of all statutes relative to the proper igations of my position as registered agely reflect a change in the registered off I in writing of this change.	noem and ner	performan I for in Ch tereby con	o this cape ace of my capter 605 firm that a	duties, and F , F.S. Or, if the limited li	er avree :	o com	oly with the and acce being file has been