M04000001843

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| Special Instructions to | Filing Officer: | |
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B. BOSTICK

MAR - 9 2012

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE: 120114 7864759

AUTHORIZATION

COST LIMIT

ORDER DATE: March 6, 2012

ORDER TIME: 10:54 AM

ORDER NO. : 120114-068

CUSTOMER NO: 7864759

CHANGE OF AGENT

NAME:

OCALA REAL ESTATE INVESTORS,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: OCALA REA | L ESTATE INVESTORS, LLC | <u> </u> | |
| 2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) | y: 3570 Keith Street, N.W. Cleveland, TN 37312 | | |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | |
| 05/14/2000 | M04000001843 | | |
| 3. Date of filing/registration in Florida | 4. Document number | | |
| 5. (a) Registered Agent and Registered Office shown on | the records of the Florida Dept | . of State: | |
| Registered Agent: | C T Corporation System | | |
| Registered Office Address: | 1200 South Pine Island Road | | |
| · · | Plantation, FL 33324 | | |
| | | 1 the | |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> | W Registered Office address: | 77 200 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | |
| NEW Registered Agent: | Corporation Service Compan | y 5 ≅ 5 - * | |
| NEW Registered Office Address: | 1201 Hays Street | | |
| (MUST BE FLORIDA STREET ADDRESS) | Tallahassee | ,FL 32301 | |
| If the limited liability company is not organized under the that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized bliability company or as otherwise provided in the articles of limited liability company. Additional company. | et address of the registered office ase of a Florida limited liability by an affirmative vote of the me | ce and the business y company, it is embers of the limite | |
| (Signature of a member or authorized representative of a member) | | | |
| Maureen Cathell, Authorized Person (Printed or typed name of signee) | | | |
| I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a c confirm that the limited liability company has been notified | gree to act in this capacity. If oper and complete performance as registered agent as provide change in the registered office it in writing of this change. | urther agree to e of my duties, and d for in Chapter 60 address, I hereby | I 8, |
| By: Syria Queput | | | |
| (Signature of Registered Agent) Corporation Service Company | Sylvia Queppet, Asst. Vice Pre | sident | |

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

INHS18 (05/08)