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(Requestor's Name)	_			
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PICK-UP WAIT MAIL				
(Business Entity Name)	_			
(Document Number)				
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Certified Copies Certificates of Status	_			
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Special Instructions to Filing Officer:	١			
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SECRETARY OF STATE
TALL AH ASSEE, FLORIDA

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COVER LETTER

Registration Section

TO:

Division of Corporations	
SUBJECT: Hibiscus Boulevard 15, LLC	
(Name of Limited L	iability Company)
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office Ch	ange and fee(s) are submitted for filing.
Please return all correspondence concerning this matt	eer to the following:
Jose Castellanos	
(Name of Person)	
Charles Baclet and Associates, Inc.	
(Firm/Company)	
2030 Main Street, Suite 1031	ECR LLAN
(Address)	ETAS
Irvine, CA 92614	OR MAR - 5 PM I: SECRETARY OF ST TALLAHASSEE, FLO
(City/State and Zip Code)	PM 1: 03 OF STATE E.FLORIDA
For further information concerning this matter, please	D
Jose Castellanos at (94	9) 955-9585
(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	nt:
\$25 Filing Fee [INHS18 (8/05)	\$55 Filing Fee & Certified Copy

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. The name of the limite	ed liability company is:	Hibiscus Boulevard 15, LLC	
2. The mailing address o	f the limited liability cor	mpany is : 101 North Main Stree	et, Suite 1203
Greenville, SC 29601			
10/11/2005		M05000005707	
3. Date of filing/registration in Florida 4. Document num		nber	
5. The name of the register Florida Department of	ered agent and the regist State:	ered office address as shown o	on the records of the
	Corporation Service Cor		
		Name	
	1201 Hays Street		
	F	Address	
	Tallahassee, FL 32301	State and Zip	TA:
	• •	•	08 * SEC
6. The name and address	of the new registered ag	ent and/or office:	MAR -
	NRAI Services, Inc.		SS S
	N	lame	
	2731 Executive Park Driv	ve, Suite 4	
	Florida street address	(P.O. Box NOT acceptable)	PH 1:03 OF STATE E. FLORID
	Weston	FL 33331	A ω
		ate and Zip	
confirmed that after the c and the business office of liability company, it is he	hange or changes are man the registered agent will breby confirmed that the	ander the laws of the State of Fade, the Florida street address I be identical. Or, in the case change(s) was/were authorized as otherwise provided in the company.	of the registered office of a Florida limited d by an affirmative vote
(Signature of a member or author	rized representative of a member	r)	
See Attached (Printed or typed name of signee)		
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm NRAI Services. Inc.	intment as registered ag is of all statutes relative id accept the obligations this document is being fi i that the limited liability	tent and agree to act in this ca to the proper and complete pi to f my position as registered a led to merely reflect a change o company has been notified in	erformance of my duties, agent as provided for in in the registered office a writing of this change.
(Signature of Registered Agent)		Jose Castellanos, As	s. Secretary
- Jose Castellarios	on of Cornerations D.) Roy 6327 Tallahassaa FI	32314

FILING FEE: \$25.00

Executed on: <u>FCB. / 0</u>, 2008.

HIBISCUS BOULEVARD 15, LLC A Delaware limited liability company

By: The H. Bernard Quante and Sophie M. Quante 1988 Trust,

its sole member

Bv

H. Bernard Quante, Trustee

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