

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000115464 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)288-0845 Fax Number : (614)573-3996

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

Address:			

LLC REGISTERED AGENT CHANGE DD/LAKELAND, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

8 70 5 8 2013 K. Brumbley DocuSign Envelope ID: C35818BA-AC00-449A-8891-1AFAB75924C4

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. No	ame of the limited liability company: DD/Lakeland, LLC					
2. (a)	655 Broad Street, 14th Floor, Newark, NJ 07102		(h) 655 Broad Street, 14th Floor, Newark, NJ 07102			
2. (Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	_		Mailing address of lunited hability company: (Note: MAY BE POST OFFICE BOX)		
3.	03/03/2006 Date of filing/registration in Florida	 	M060000012	286 Document number		
	CORPORATION SERVICE COMPANY	••		Dodanen minoc		
5. (a)	Registered Agent and Registered Office shown on the records of the Registered Office Address (MUST BE FLORIDA STREET AI					
	1201 HAYS STREET			_		
	TALLAHASSEE , FL 3	32301-25	25	,	30033 -	
(b)	C T Corporation System			- 3	MAR 27	
107	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	lness:		7 AMIN 5	
	NEW Registered Office Address:			-	ഗ ച	
	1200 South Pine Island Road					
	Plantation, FL_3	13324				
the cha agent v was/we	imited liability company is not organized under the laws inge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of the organization or the operating agreement of the liabor of organization.	he regis pility co the lim	tered office mpany, it is ited liability	and the business office of the hereby confirmed that the company or as otherwise party	the registered change(s)	
John		John	Usner			
I here, provisi the obl to mero notified By:	the first member of authorized representative of a member of a dependent of the appointment as registered agent and agree on so fail statutes relative to the proper and complete prigations of my position as registered agent as provided ely reflect a change in the registered office address. The Tin writing of this change. C T Corporation System Stephen Rullis, VP & Asst. Secy.	erforme Tör in C	in this capa tace of my a hapter 605,	iuties, and Lam familiar wi , F.SOr, if this document :	th and accept is being tiled	

Division of Corporations • P.O. Box 6327 • Tallahassee, F1. 32314 F1LING FEE: \$25,00