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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

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RA/RD/Ch8



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Becky Arnold barnold0@cscinfo.com

Date: June 25, 2014

Order#: 191961-010

Re: ACP PALMETTO LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Becky Arnold c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

COVER LETTER

TO: Registration Section Division of Corporations						
SUBJECT: ACP Palmetto UC 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:						
Hiru Bellara Name of Person						
Building and Land Technology Corp. Firm/Company						
100 Washington Blvd. Ste. 200 Address						
Stamford, Ct. 06902 City/State and Zip Code						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Hiru Bellara al 203, 644-1517						
Name of Person Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: MAILING ADDRESS: Pariety sign Services Pariety sign Services						
Registration Section Registration Section Division of Corporations Division of Corporations						
Clifton Building P.O. Box 6327						
2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301						
Enclosed is a check for the following amount:						
□ \$25 Filing Fec □ \$55 Filing Fec & Certified Copy						

INHS18 (2/14)

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. Na	me of the limited liability company: ACP Palmetto	LLC				
2 (0)	BUILDING AND LAND TECHNOLOGY	/LX	D~ .:	Wing and Land Technology		
Z. (a)	Principal office address of limited liability company;	(0)		Mailing address of limited liability company:		
	(Note: MUST BE STREET ADDRESS)		·	(Note: MAY BE POST OFFICE BOX)		
	100 WASHINGTON BLVD, SUITE 200		<u>[00</u>]	washington bud Ste 200		
	Chamfard CT 00000	<u> </u>	C	amford Ct OLADZ		
	Stamford, CT 06902	 -	_ <u> </u>	arriad a boild		
	06/02/2014		M140000	02756		
3.	Date of filing/registration in Florida	- _{4.} -	M 140000	Document number		
٠.		٠,		boomen minor		
5. (a)				-		
	Registered Agent and Registered Office shown on the records of	f the Florida L	Dept. of State	:		
	1200 SOUTH PINE ISLAND ROAD			7 49		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			JUN 26		
				72 写		
				0 3 K		
	PLANTATION , FJ	33324				
	0 0 - 1 0					
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	1.000		. 5		
	rade trains of them Vestigisted Absul among them Resilieses	n Olice wall	<u>ress</u> ;	•		
	1201 Hays Street					
	NEW Registered Office Address;			•		
				•		
	~					
	<u>Tallahassee</u> , FI	32301				
If the li	mited liability company is not organized under the la	ws of the S	State of Flo	orida, it is hereby confirmed that after		
the cha	nge or changes are made, the Florida street address of	f the registe	ered office	and the business office of the registered		
was/we	vill be identical. Or, in the case of a Florida limited li	of the limit	npany, it is ed liabilit	s hereby confirmed that the change(s) y company or as otherwise provided in		
the arti	cles of organization or the operating agreement of the	limited lia	ability con	ipany.		
	000	m	uio F	Printed or typed name of signee		
Signal	ure of a member or authorized representative of a member			Printed or typed name of signee		
provisi the obl to meta	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I have thing of this change.	ree to act it performared for in Ch hereby con	n this cape nce of my c napter 605 nfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been		
7	Sech VIII D		Beeler	Arnold Accidemy > /D		
Signatu	e of Registered Atent Corporation Service Company	BY:	Беску	Arnold, Assistant VP		
		Rox 6377=	Tallahoe	see FL 32314		
Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.60						

INHS18 (2/14)