Division of Corporations



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.

(((H190002305973)))



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 : (614)230-3338 : (954) 208-0845 Fax Number **Enter the email address for this husiness entity to be used for future annual report mailings. Enter only one email address please.****** Email Address: LLC REGISTERED AGENT CHANGE

S-H THIRTY-FIVE OPCO - LAKE ORIENTA, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	02
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.

(a)	Principal office address of limited hability company: Mailing address of limited liability company:						
` '	Principal office address of limited hability company: (Note: MUST BE STREET ADDRESS)			Mailing address of tNote; MAYBE	imited POST	liability c <i>OFFICE</i>	ompany: <i>ROX)</i>
	1920 Main Sueet, Suite 1200		1920 Main Street, Suite 1200				
	fivine, CA 92614			92614			
	07/16/2015 Date of filing/registration in Florida	_	M1	15000005670_			· · · · · · · · · · · · · · · · · · ·
		4.		Document nun	iber		
(8)	CORPORATION SERVICE COMPANY			<u>-</u>			
	Registered Agent and Registered Office shown on the records of		Dept. of State	2			
	1201 HAYS STREET						
	Registered Office Address (MUST BE FLORIDA STREET)	TADDRESS	Ž.				
					. •	- 0	
	TALEAHASSEE, F	32301		Š	: : 		
(b)	CT Corporation System				í. 	 د ب	2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office ad	dress			1	i,
	1200 South Pine Island Road				े	C H	TO O
	NEW Registered Office Address			•	€ €100 3.1	£ 25	
	Plantation	33324		-			
	, r	· · ·		•			
e cha cut w is we	mited liability company is not organized under the lange or changes are made, the Florida street address of all be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regi liability eq of the lim re limited i	stered office ompany, it is sited liabiling	e and the busine s hereby confirt y company or a ipany.	ss off ned th	ice of th at the cl	e registero narge(s)
Signal	ure of a member or (orb)rized representative of a member			Printed or typed o	nume of	signed	
herel ovisi e ohl	ov accept the appointment as registered agent and a ons of all stanues relative to the proper and complet igations of my position as registered agent as provid- ly reflect a change in the registered office address.	gree to ac le perform led for in G I hereby c	t in this cap ance of my o hapter 605 onfirm that	acity. I further duties, and I am i, F.S. Or, if thi the limited liab.	agree Hamil S docu Hity ca	tó com lar with iment is ompany	nly with the and accep being file has been