M1700000533E

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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WORRIS J. HARRIS



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: December 29, 2017

Order#: 960642-128

Re: SAND LAKE 2 MULTI-FAMILY HOLDING (GP) 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: Tecora Bell

c/o Corporation Service Company

251 Little Falls Drive 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

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.

	Tame of the limited liability company: _5	SANU LAKE Z		HOLDING (GP) LL		
2. (a)	20435 NORTH 7TH STREET Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)	_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	PHOENIX AZ	85024				
	06/19/2017		M17	000005338		
3.	Date of filing/registration in F	lorida	4.	Document nui	mber	
5. (a)	CAPITOL CORPORATE SERVICES	S, INC.				
	Registered Agent and Registered Office shown on the records of the Florida Dept, of State:					
	515 EAST PARK AVENUE, 2ND FL					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	TALLAHASSEE	, F1_	. 32301		- 	
(b)						
	Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered	Office address:		*	
	1201 House Charlet				∵. ⇔	
	1201 Hays Street NEW Registered Office Address:				p _a	
	regiments office / Marcon				~	
	Tallahassee	EI	, 32301			
	Tananassos	, r <u>L</u>	,_ 32301			
the cha agent was/w	limited liability company is not organize ange or changes are made, the Florida strail be identical. Or, in the case of a Florier authorized by an affirmative vote of icles of organization or the operating agreement.	reet address of rida limited lia the members o	the registered ability company of the limited lia	office and the busing it is hereby confirability company or a	ess office of the registered med that the change(s)	
	Jee & Gones		Jill Cilmi, A	Authorized Person		
	ature of a member or authorized representative of			Printed or typed	Č	
provis the ob to mer	by account the appointment as registered ions of all statutes relative to the proper ligations of my position as registered age in the registered off in writing of this change.	agent and agr and complete ent as provide ice address, I	ee to act in this performance of d for in Chapte hereby confirm	s capacity. I further f my duties, and I an r 605, F.S. Or, if th that the limited liah	agree to comply with the n familiar with and accep is document is being filed pility company has been	
₩	Inco Cotuble					

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