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To:

Division of Corporations Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY Account Number : I2000000195

(850) 521-1000 (850) 558-1515 Phone Fax Number

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

Email Address:

## REGISTERED AGENT CHANGE AVION PARK ASSOCIATION, INC.

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|---|----------------------------|
| Certificate of Status                   | 0                          |
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha                     | e provisions of sections 607.0502, 617.0502, 607.13<br>hange is submitted for a corporation organized undo<br>der to change its registered office or registered ager   | er the laws of the State of Florida   |         |
|--------------------------------------|--|---|---------|
| 1. The name of                       | of the corporation: AVION PARK ASSOCIATION   | ON, INC.  |         |
| 2. The principal                     | al office address: 402 Washington Street SE, Su  | ite 200, Gainesville, GA 30501  |         |
| 3. The mailing a                     | g address (if different):  |   |         |
| 4. Date of incorp                    | orporation/qualification: 07/12/2007 Do  | cument number: N07000006901   |         |
|                                      | nd street address of the current registered agent and partment of State:   | registered office on file with the  |         |
|                                      | Lawrence W. Smith  |   |         |
|                                      | 101 East Kennedy Blvd, Suite 3700  |   | _       |
|                                      | Tampa, FL 33602  | 10 OCT 21   | jr<br>T |
| 6. The name and (if changed):        | nd street address of the new registered agent (if char<br>):   | nged) and /or registered office   |         |
|                                      | Corporation Service Company  |   | ii.     |
|                                      | 1201 Hays Street   | •   |         |
|                                      | (P.O. Box NOT acceptable)  |   |         |
|                                      | Tallahassee, FL 32301  |   |         |
| The street address changed will      | lress of its registered office and the street address ill be identical.  | of the business office of its registered agent,   |         |
| Such change was<br>authorized by the | was authorized by resolution duly adopted by its the board, or the corporation has been notified in  | poard of directors or by an officer so writing of the change.   |         |
| Bla                                  | Blance   | za Lozada, Attorney in Fact   |         |
| 1                                    | ature of an officer or director)   | (Printed or typed name and title)   |         |
| corporation has                      | pt the appointment as registered agent and agree<br>e to comply with the provisions of all statutes rela<br>and I am familiar with and accept the obligation of<br>eing filed merely to reflect a change in the registe<br>as been notified in writing of this change.<br>tion Service Company | to act in this capacity,<br>tive to the proper and complete performance<br>of my position as registered agent. Or, if this<br>red office address, I hereby confirm that the |         |
| By:                                  |  | 0/2010  |         |
| (6i)                                 | Signature of Registered Agent)   | (Date)  |         |
| If signing on be                     | behalf of an entity:   |   |         |
| Sylvia Quepp                         | pet, Asst. VP  |   |         |
| (1                                   | (Typed or Printed Name)  |   |         |