## L11000131288

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PICK-UP	☐ WAIT	MAIL	
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B. BOSTICK
MAR 2 1 2012
EXAMINER

ACCOUNT NO. : 12000000195

REFERENCE: 135502 4720460

AUTHORIZATION

COST LIMIT

ORDER DATE: March 19, 2012

ORDER TIME : 9:32 AM

ORDER NO. : 135502

CUSTOMER NO: 4720460

## CHANGE OF AGENT

NAME: 125502 LINES 1-53

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Stephanie Milnes -- EXT# 2920

EXAMINER:

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: 710 NORTH S	UN DRIVE OPERATIONS LLC
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	800 Concourse Parkway South Suite 200 Maitland, FL 32751
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
11/17/2011	L11000131288
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	CT Corporation System
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassee ,FL 32301
If the limited liability company is not organized under the last after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the can be received that the change(s) was/were authorized by iability company or as otherwise provided in the articles of imited liability company.  Signature of a member or authorized representative of a member)	address of the registered office and the business se of a Florida limited liability company, it is
- -	SSE 20
Maureen Cathell, Authorized Person Printed or typed name of signee)	FG & C
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- im familiar with and accept the obligations of my position of S. Or, if this document is being filed to merely reflect a ci- confirm that the limited liability company has been notified	ree to act in this capacity. I further agree to per and complete performance of the duties, and its registered agent as provided for Mchapter 60 hange in the registered office address, I hereby in writing of this change.
Signature of Registered Agent)	
Signature of Registered Agent) Corporation Service Company	Frace E. Kirby, Asst. VP

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

INHS18 (05/08)