

From:

Division of Corporations

06/30/2014 20:10

#375 P.001/002

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m1000005193

Florida Department of State
Division of Corporations
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From:

06/30/2014 21:11

#975 P.002/002

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

Pursuant to the provisions of sections 605.0114, 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: Optima Highland LLC

2. (a) Principal office address of limited liability company: 200 SOUTH BISCAYNE BLVD.
SUITE 6500
MIAMI, FL 33131
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 200 SOUTH BISCAYNE BLVD.
SUITE 6500
MIAMI, FL 33131
(Note: MAY BE POST OFFICE BOX)

11/24/2010
3. Date of filing/registration in Florida

M1000005193
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: KORF, MORDECHAI

Registered Office Address: 200 SOUTH BISCAYNE BLVD.
SUITE 6500
MIAMI, FL 33131

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: National Corporate Research, Ltd., Inc.

NEW Registered Office Address:
(MUST BE FLORIDA STREET ADDRESS) 165 Office Plaza Drive
Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
Signature of a member or authorized representative of a member

Chaim Schochet
Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
Signature of Registered Agent

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