MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L13000088963

Entity Name: LOFTON ISLAND DEVELOPMENTS GP LLC

Current Principal Place of Business:

3040 OASIS GRAND BLVD 3RD FLOOR MANAGEMENT OFFICE FORT MYERS, FL 33916

Current Mailing Address:

3040 OASIS GRAND BLVD **3RD FLOOR MANAGEMENT OFFICE** FORT MYERS, FL 33916 US

FEI Number: 38-3910088

Name and Address of Current Registered Agent:

LOFTON ISLAND GP, LLC 3040 OASIS GRAND BLVD **3RD FLOOR MANAGEMENT OFFICE** FORT MYERS, FL 33916 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	NEIL MORLEY			04/23/2016
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	CEO	Title	MANAGER	
Name	ARMOYAN , GEORGE	Name	LAING, GORDON	
Address	84 CHAIN LAKE DRIVE SUITE 500	Address	1475 LOWER WATER STREET SUITE 100	
City-State-Zip:	HALIFAX B3S 1A2	City-State-Zip:	HALIFAX B3J 3Z2	
Title	MANAGER	Title	MANAGER	
Name	DARROW, STEVEN	Name	MURPHY, PAUL	
Address	84 CHAIN LAKE DRIVE SUITE 500	Address	1475 LOWER WATER STREET SUITE 100	
City-State-Zip:	HALIFAX B3S 1A2	City-State-Zip:	HALIFAX B3J 3Z2	

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GORDON LAING

Certificate of Status Desired: No

FILED Apr 23, 2016 Secretary of State CC6817271691

> 04/23/2016 Date