01(2)(100)				
FEI Number: 46-4732065			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
CORPORATION 1201 HAYS STR TALLAHASSEE				
The above named	entity submits this statement for the purpose of changing	its registered office or re	egistered agent, or both, in the State of Fl	orida.
SIGNATURE	: JENNIFER BRENDLE			04/18/2018
	Electronic Signature of Registered Agent			Date
Authorized F	Person(s) Detail :			
Title	MANAGING MEMBER	Title	AUTHORIZED PERSON	
	BRICKELL BAYVIEW APARTMENTS, LP	Name	STEPHENS , SAMUEL C. III	

Address

City-State-Zip:

2001 SUMMIT PARK DR., STE. 300 ORLANDO, FL 32810

DOCUMENT# M14000001353

## **Current Mailing Address:**

2001 SUMMIT PARK DR., STE. 300 ORLANDO, FL 32810

**Current Principal Place of Business:** 

## F

Address

City-State-Zip:

## N

2001 SUMMIT PARK DR., STE. 300

ORLANDO FL 32810

Entity Name: BRICKELL BAYVIEW OWNER GP, LLC

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: SAMUEL C. STEPHENS III

AUTHORIZED PERSON

2001 SUMMIT PARK DR., STE. 300

ORLANDO FL 32810

04/18/2018

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Apr 18, 2018 Secretary of State CC9653184419

Date