SIGNATURE: NORMA WHEELER Electronic Signature of Signing Officer/Director Detail

above, or on an attachment with all other like empowered.

ANTATION FL 33324 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Officer/Director Detail :					
Title	PRESIDENT, DIRECTOR	Title	SECRETARY, VP		
Name	CORR, CHRISTOPHER T.	Name	BRIDWELL, MARK R.		
Address	225 WATER STREET, SUITE 1400	Address	225 WATER STREET, SUITE 1400		
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	JACKSONVILLE FL 32202		
Title	TREASURER	Title	DIRECTOR		
Name	FRICKE, ANDREW K.	Name	MCHUGH, MARK		
Address	225 WATER STREET, SUITE 1400	Address	225 WATER STREET, SUITE 1400		
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	JACKSONVILLE FL 32202		
Title	DIRECTOR	Title	ASSISTANT SECRETARY		
Title Name	DIRECTOR NUNES, DAVID L.	Title Name	ASSISTANT SECRETARY WHEELER, NORMA		
Name	NUNES, DAVID L. 225 WATER STREET, SUITE 1400	Name	WHEELER, NORMA		
Name Address	NUNES, DAVID L. 225 WATER STREET, SUITE 1400	Name Address	WHEELER, NORMA 225 WATER STREET, SUITE 1400		
Name Address City-State-Zip:	NUNES, DAVID L. 225 WATER STREET, SUITE 1400 JACKSONVILLE FL 32202	Name Address City-State-Zip:	WHEELER, NORMA 225 WATER STREET, SUITE 1400 JACKSONVILLE FL 32202		
Name Address City-State-Zip: Title	NUNES, DAVID L. 225 WATER STREET, SUITE 1400 JACKSONVILLE FL 32202 ASSISTANT SECRETARY	Name Address City-State-Zip: Title	WHEELER, NORMA 225 WATER STREET, SUITE 1400 JACKSONVILLE FL 32202 ASSISTANT SECRETARY		
Name Address City-State-Zip: Title Name Address	NUNES, DAVID L. 225 WATER STREET, SUITE 1400 JACKSONVILLE FL 32202 ASSISTANT SECRETARY WEIDENHAFT, JOHN	Name Address City-State-Zip: Title Name	WHEELER, NORMA 225 WATER STREET, SUITE 1400 JACKSONVILLE FL 32202 ASSISTANT SECRETARY ARTHUR, TRACY 1901 ISLAND WALKWAY		

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears

Continues on page 2

ASSISTANT SECRETARY

2016 FOREIGN PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F0700000586

Entity Name: RAYDIENT PLACES + PROPERTIES INC.

Current Principal Place of Business:

225 WATER STREET, SUITE 1400 JACKSONVILLE, FL 32202

Current Mailing Address:

225 WATER STREET, SUITE1400 JACKSONVILLE, FL 32202 US

FEI Number: 06-1158895

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US FILED Aug 23, 2016 Secretary of State CC6073026510

Date

Certificate of Status Desired: No

08/23/2016

Date

Officer/Director Detail Continued :

Title	CHIEF ACCOUNTING OFFICER	Title	ASSISTANT SECRETARY
Name	KIKER , EDWIN	Name	KYLE, SAWICKI
Address	225 WATER STREET, SUITE 1400	Address	1901 ISLAND WALKWAY
City-State-Zip:	JACKSONVILLE FL 32202	City-State-Zip:	FERNANDINA BEACH FL 32034
Title	VP		

Address225 WATER STREET, SUITE 1400City-State-Zip:JACKSONVILLE FL 32202

RANGER, SUSAN

Name