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SECRETARY OF STATE
LENASSEE, FLORIDA

FEB 0 3 2016

S MASON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez MARISSA.RATHER-LOPEZ@CSCGLOBAL.COM

Date: January 29, 2016

Order#: 943942/041

Re: S/ST. LUCIE PROPERTY, LTD.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Marissa Rather-lopez c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

0 0	. .	•			
1.	S/ST. LUCIE PF	ROPERTY,	LTD.		
Na	me of Limited Partnership or Lin	·		hip	
2 09	09/30/2004		A04000001551		
Date of filing/registration in Florida		~· <u></u>	Florida docun	nent number	
4. The name of the re Department of State:	gistered agent and the registered	office address a	s shown on the	records of the Flo	orida
	Bluth, Thomas M - C/C	SFO Mana	agement, LL	_C	
	Nar	ne			
	301 E Las Olas	Boulevard, 8	300		
	Add	ress			
	Ft. Lauderdale	FL.	33301		
	City, State	and Zip			
5. The name and Flor	rida street address of the new reg	istered agent and	d/or office:	2016 FEB	an a l
	Corporation Ser	vice Compa	nv	HAT FEB	- -
	Nai	······		-2 ARY SSE	r
	1201 Hay	s Street		$\omega_{\mathcal{O}}$	
	Florida street address (P		eptable)	ST B	C
	Tallahassee	FL	32301	A 10: 49 F STATE FLORIDA	
	City, State		'	·D	
6. Such change(s) is/	are effective when filed by the Fl	lorida Departme	nt of State.		
2	DENIP	* .			
Signature of General	Partner				
comply with the provi and I am familiar wit	opointment as registered agent an isions of all statutes relative to th h an accept the obligations of my	e proper and co	mplete perform		
By: Corporati	on Service Company		beth A. Daw	son, AVP	
	ed Agent By: S/St. Lucie Pro				
	A DJ. Glob Bacie I I	-r, , ,, ,, ,,	9 Par		
Filing Foot	\$35.00				

Certified Copy (optional): \$52.50