

B1300000136

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CAPITOL CORPORATE SERVICES, INC.
Account Number : 120160000048
Phone : (800)345-4647
Fax Number : (800)432-3622

RECEIVED
JAN 25 2018

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

REGISTERED AGENT CHANGE BRITTON HILL HOLDINGS I GP, LP

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

JAN 26 2018
J. HARRIS

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**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 predesignated 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:

1. BRITTON HILL HOLDINGS I GP, LP

Name of Limited Partnership or Limited Liability Limited Partnership

2. 5/2/2013

Date of filing/registration in Florida

3. B13000000138

Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

BAJPAI, AMAR D

Name

1200 ANASTASIA AVENUE, STE. 500

Address

CORAL GABLES, FL 33134

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Capitol Corporate Services, Inc.

Name

515 East Park Avenue 2nd Fl

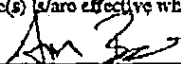
Florida street address (P.O. Box not acceptable)

Tallahassee

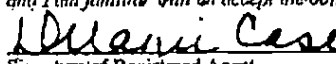
FL 32301

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State:


Signature of General Partner

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.


Signature of Registered Agent

Delanie Case, Asst. Secretary on behalf
of Capitol Corporate Services, Inc.

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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