

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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## REGISTERED AGENT CHANGE WESTFIELD HOMES USA, INC.

Certificate of Status	0
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Corporate Filing Menu

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C. GOLDEN

FEB 1 4 2018

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of char	rovisions of sections 607.0502, 617.0502 age is submitted for a corporation organi to change its registered office or registe.	ized under the laws of the State of $\_$	Delaware	his 	
1. The name of t	ne corporation: WESTFIELDHOMESUS.	A,INC.			
2. The principal	nc corporation: WESTFIELDHOMESUS.  office address: 405 N. REO STREET., SUI	TE 330, TAMPA, FL 33609			
3. The mailing a	ddress (if different): 15360 BARRANCA P	ARKWAY, IRVINE, CA 92618			
4. Date of incorp	oration/qualification: 12/06/2002	Document number: F0200000	)6066		
	street address of the current registered ag tment of State:(If resigned, enter resigned		ith the		
	REGISTEREDAGENTS OLUTIONS, INC	•	;		
	1550FFICEPLAZADR.,STE.A			2018 9	
	TALLAHASSEE,FL32301	·		FEB I	- <u>T?</u>
6. The name and street address of the new registered agent (if changed) and /or registered (if changed):		fice	GO Rivinos		
	CTCorporationSystem		- :-	9.	
	1200 South Pine Island Road		<del>,</del>	17	
	P.O. Box NOT: Plantation, Florida 33324	всееряльle			
The street addre	ss of its registered office and the street a be identical.	address of the business office of it	s register	ed ager	11,
	s authorized by resolution duly adopted e board, or the corporation has been not	by its board of directors or by an ified in writing of the change.			
$\cup$	Michel Holden	MicheleHolden, Secretary  Printed or typed name and title			
I herchy accept I further agree to	the appointment as registered agent and o comply with the provisions of all statu my duties, and I am familiar with and ac s document is being filed merely to refle that the corporation has been notified in	l agree to act in this capacity. tes relative to the proper and com- event the obligation of my position	plete	tered s, I	
By: CTCorp	ornjon System Oll	2/13/2018			
If signing on be	nalfofan entity: Kristin Bolden Sistant Secretary	Date			

\* \* \* FILING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO; DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL32314 CR2F045 (03/12)