F12,000004197

| (Requestor's Name) | |
|---|--|
| (Address) | |
| (Address) | |
| (City/State/Zip/Phone #) | |
| PICK-UP WAIT MAIL | |
| (Business Entity Name) | |
| (Document Number) | |
| Certified Copies Certificates of Status | |
| Special Instructions to Filing Officer: | |
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| | |

Office Use Only



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SECRETARY OF THE PH 3: 02

Bo Chauf



July 30, 2015

Department of State Att: Brenda Tadlock Division of Corporations, Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

RE: CHANGE OF ADDRESS OF AGENT FOR SERVICE OF PROCESS FOR PANORAMIC HOMES INC. and TAMPA VALUE PROPERTIES INC.

Dear Ms. Tadlock,

Business Filings Incorporated provides the agent for service of process in Florida. Please be advised that the address of the agent for service process has been changed from: Business Filings, Incorporated, 515 East Park Avenue, Tallahassee, FL 32301to:

Business Filings Incorporated 1200 South Pine Island Road Plantation, Florida 33324

Enclosed is our check for \$70.00 to cover the filing fee.

Please advise us when the address change has been noted and issue whatever evidence of filing that may be usual.

Thank you,

Business Filings Incorporated

Marie Hauer, Manager Agent Services 111 8th Avenue, 13th Floor New York, NY 10011 marie.hauer@wolterskluwer.com

COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|----------------|
| SUBJECT: PANORAMIC HOMES INC. | _ |
| Name of Corporation | |
| DOCUMENT NUMBER: F12000004197 | - |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for | filing. |
| Please return all correspondence concerning this matter to the following: | |
| Marie Hauer | |
| Name of Contact Person | • |
| CT Corporation | - |
| Firm/Company | (E. 12) |
| 111 8th Ave, 13th Floor Address | |
| New York, NY 10011 | 200 F |
| City/State and Zip Code | 3: 02 |
| E-mail address: (to be used for future annual report notification | |
| For further information concerning this matter, please call: | · |
| Marie Hauer 212 894-85 | |
| Name of Contact Person Area Code & Daytime Tele | phone Number |

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327

Enclosed is a \$35.00 check made payable to the Department of State.

Taliahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CR2E045 (03/12)

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

| statement of ch | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statuange is submitted for a corporation organized under the laws of the State of $\frac{\text{Florida}}{\text{Florida}}$ | da É | _ |
|---|--|---------------------|-----------|
| | er to change its registered office or registered agent, or both, in the State of Florid | da. | |
| | the corporation: PANORAMIC HOMES INC. | | |
| 2. The principal | office address: | | |
| 3. The mailing a | address (if different): | | |
| 4. Date of incor | poration/qualification: 10/15/2012 Document number: F1200000 |)4197 | |
| 5. The name and | d street address of the current registered agent and registered office on file with the thrent of State: (If resigned, enter resigned) | e | |
| | BUSINESS FILINGS INCORPORATED | | |
| | 515 EAST PARK AVENUE | | • |
| , | TALLAHASSEE, FL 32301 | SEC | 55 |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office | AHASSEE | AUG -4 PM |
| | 1200 South Pine Island Road | <u> </u> | င့္ |
| | P.O. Box NOT acceptable | | 02 |
| | Plantation, Florida 33324 | | |
| The street address changed will | ess of its registered office and the street address of the business office of its regi be identical. | stered age | nt, |
| Such change wa authorized by th | is authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change. | r so | |
| Signatu | re of an officer or director Printed or typed name and title | | |
| I hereby accept I further agree t performance of agent. Or, if thi hereby confirm | the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as re s document is being filed merely to reflect a change in the registered office addithat the corporation has been notified in writing of this change. | gistered ress, I | |
| Signing on bel | marker Registered Agens' Date Date Date | | |
| Brenna Lutt | 0 | | |
| | ped or Printed Name | | |
| | * * * FILING FEE: \$35.00 * * * | | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)