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Division of Corporations

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: (850)617-6380

From:

Account Name : URS AGENTS LLC
Account Number : I20150000127
Phone : (800)567-4397

Fax Number

: (800)567-4398

.
**Enter the email address for this business entity to be used for future

Email Address: jgawlinski@lpiholdings.com

REGISTERED AGENT CHANGE LEWIS PROPERTY INVESTORS, INC.

annual report mailings. Enter only one email address please.**

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August 24, 2017

FLORIDA DEPARTMENT OF STATE

Division of Corporations

LEWIS PROPERTY INVESTORS, INC. 3550 BISCAYNE BLVD. # 602 MIAMI, FL 33137US

SUBJECT: LEWIS PROPERTY INVESTORS, INC.

REF: J00739

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The capacity of the officer/director signing should be indicated. Ex. President, Vice President, Chairman of the Board, etc.

THE PERSON SIGNING MUST INDICATE WHETHER THEY ARE A POWER OF ATTORNEY OR AN AUTHORIZED SIGNER.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

FAX Aud. #: H17000225863 Susan Tallent Letter Number: 717A00017436 Regulatory Specialist II

(((H17000225863 3)))

(FAX)

COVER LETTER

TO:

Amendment Section Division of Corporations

LEWIS PROPERTY INVESTORS, INC.

DOCUMENT NUMBER: J00739

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:

JENNIFER GAWLINSKI

Name of Contact Person

LEWIS PROPERTY INVESTORS, INC.

Firm/Company

2614 TAMIAMI TRIAL NORTH, STE 632

NAPLES, FL 34103

City/State and Zip Code

jgawlinski@lpiholdings.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

URS Agents C/O Kanetha Bishop at 800 567-4397

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35,00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassoe, FL 32314

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

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this
statement of change is submitted for a corporation organized under the laws of the State of FLin order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: LEWIS PROPERTY INVESTORS, INC.
2. The principal office address: 247 AIRPORT PULLING ROAD S. NAPLES, FL 34104
The principal drice address:
3. The mailing address (if different); 2614 TAMIAMI TRAIL NORTH, SUITE 632 NAPLES, FL 34103
4. Date of Incorporation/qualification: 02/24/1986 Document number: J00739
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (if resigned, enter resigned)
S.K.R.L.D., INC.
201 ALHAMBRA CIRCLE, 1102
CORAL GABLES, FL 33134
i. The name and street address of the new registered agent (if changed) and /or registered office.
URS AGENTS, LLC
3458 LAKESHORE DRIVE
P.O. Rox NOT acceptable TALLAHASSEE, FL 32312
The street address of its registered office and the street address of the business office of its registered agent, s changed will be identical.
such change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board, or the corporation has been notified in writing of the change.
Jim Geeslin for Thomas E. Lewis, Authorized Signer
hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete erformance of my duties, and I am familiar with and accept the obligation of my position as registered gent. Or, if this document is being filed merely to reflect a change in the registered office address, I are confirm that the corporation has been notified in writing of this change.
Signature of Respirered Agent Signing on behalf of an entity:
Kimberly Rogers, Vice President Typed or Printed Name

* * * FILING PEE: \$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)