STEEL

HECTOR

Steel Hector & Davis LLP

200 South Biscayne Boulevard

DAVIS

Miami, Florida 33131-2398

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Examiner's Initials

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

۱	(Corporation Name)	(Document #)	
2.	(Corporation Name)	(Document #)	
3.	(Corporation Name)	(Document #)	
4.	(Corporation Name)	(Document #)	-
	☐ Walk in ☐ Pick up time _	Certified Copy	
	Mail out Will wait	☐ Photocopy ☐ Certificate of Status	
	NEW FILINGS	AMENDMENTS	
	Profit Not for Profit Limited Liability Domestication Other	Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger	
	OTHER FILINGS	REGISTRATION/QUALIFICATION	
	☐ Annual Report ☐ Fictitious Name	☐ Foreign ☐ Limited Partnership ☐ Reinstatement ☐ Trademark ☐ Other	_

CR2E031(7/97)



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

September 18, 2000

STEEL HECTOR DAVIS 200 SOUTH BISCAYNE BLVD. MIAMI, FL 33131-2398

SUBJECT: AURORA GP, L.L.C. Ref. Number: L00000002641

We have received your document for AURORA GP, L.L.C. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 487-6020.

Tammi Cline Document Specialist

Letter Number: 800A00049067

10 OCT -2 PM 5:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the State of Florida.	3 3	3			
1. The name of the limited liability company is: AURORA GP, L.L.C.					
2. The mailing address of the limited liabil	ity company is: 200 S. Biscay	ne Blvd., Ste #4100			
Miami, Florida 33131					
3/08/2000 3. Date of filing/registration in Florida					
5. Date of ming/registration in Florida	4. Document nu	mber			
The name of the registered agent and the Florida Department of State:	registered office address as shown	on the records of the			
FERNANDEZ (QUINCOCES, GULLERMO J.				
	Name				
@ South Bis	scayne Blvd., Ste 3500	, ,			
	Address				
	orida 33131				
	City, State and Zip				
6. The name and address of the new register	red agent and/or office:				
RJVF Corpo	Prate Services, Inc.	SE 86			
7 1000	Name	FIL 00 OCT -2 SECRETAR			
200 South	Biscayne Blvd., Suite #4100				
	ldress (P.O. Box NOT acceptable)				
261 1		PH PD			
Miami —	FL 33131	SIAH			
C	City, State and Zip				
of the limited liability company is not organ confirmed that after the change or changes a and the business office of the registered age iability company, it is hereby confirmed that of the members of the limited liability comporting agreement of the limited liability	are made, the Florida street address on twill be identical. Or, in the case at the change(s) was/were authorized pany or as otherwise provided in the ability company.	Florida, it is hereby of the registered office of a Florida limited d by an affirmative vote.			
Signature of a member or authorized representative of a	ı member)				
YOSE A. GARRICO, YR					
(Printed or typed name of signee)	-				
I hereby accept the appointment as register comply with the provisions of all statutes religion of all statutes religion of all statutes religion of am familiar with and accept the obligion confirmation of the limited like the like	ed agent and agree to act in this cal lative to the proper and complete pe ations of my position as registered a zing filed to merely reflect a change ability company has been notified in	pacity. I further agree to rformance of my duties, gent as provided for in in the registered office writing of this change.			
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314					

FILING FEE: \$25.00

INHS18(10/99)