1010000001654

| (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: |
| |
| |
| |

Office Use Only



000254909470

12/27/13--01010--005 **25.00

13 DEC 27 AATH: 42



Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company

Capitol Corporate Services, Inc.

PO Box 1831 Austin, TX 78767

Phone: 800-345-4647 Fax: 800-432-3622

regagent@capitolservices.com

Secretary of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 DATE: STATE:

12/19/2013 FLORIDA

REP UNIT: COMMERCIAL MANAGEMENT

PROPERTIES, LLC

Enclosed for filing please find a Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company for the above referenced name, which is to be filed in your office. Enclosed is check #24668 in the amount of \$25.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions please call 800-345-4647 and ask for the Change of Agent Section of the Registered Agent Department.

Should you need to return this document for any reason please send it to:

Capitol Corporate Services, Inc. PO Box 1831
Austin, TX 78767

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.

| 1. Name of the limited liability company: COMMER | CIAL MANAGEMENT PROPERTIES, LLC |
|---|--|
| 2. (a) Principal office address of limited liability comp | 1940 Park Avenue |
| | Miami Beach, FL 33139 |
| (Note: MUST BE STREET ADDRESS) | |
| | |
| (b) Mailing address of limited liability company: | 1940 Park Avenue |
| (Note: MAY BE POST OFFICE BOX) | Miami Beach, FL 33139 |
| | |
| 5/11/2001 | L01000007654 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown | on the records of the Florida Dept. of State: |
| Registered Agent: | Adrian Alexandru |
| Registered Office Address: | 1940 Park Avenue |
| | Miami Beach FL 33139 |
| (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: | |
| | |
| | |
| NEW Registered Agent: | Capitol Corporate Services, Inc. |
| NEW Registered Agent: NEW Registered Office Address: | |
| NEW Registered Agent: | Capitol Corporate Services, Inc. |
| NEW Registered Agent: NEW Registered Office Address: | Capitol Corporate Services, Inc. 155 Office Plaza Drive, Suite A Tallahassee , FL 32301 he laws of the State of Florida, it is hereby e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any. |
| NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability comp | Capitol Corporate Services, Inc. 155 Office Plaza Drive, Suite A Tallahassee , FL 32301 the laws of the State of Florida, it is hereby e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any. |
| NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member | Capitol Corporate Services, Inc. 155 Office Plaza Drive, Suite A Tallahassee , FL 32301 the laws of the State of Florida, it is hereby e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any. |
| NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member | Capitol Corporate Services, Inc. 155 Office Plaza Drive, Suite A Tallahassee , FL 32301 the laws of the State of Florida, it is hereby e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any. |
| NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member ADRIAN ALEXANDRU Printed or typed name of signee | Capitol Corporate Services, Inc. 155 Office Plaza Drive, Suite A Tallahassee , FL 32301 the laws of the State of Florida, it is hereby e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any. |
| NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member ADRIAN ALEXANDEU Printed or typed name of signee I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp | Capitol Corporate Services, Inc. 155 Office Plaza Drive, Suite A Tallahassee , FL 32301 the laws of the State of Florida, it is hereby e Florida street address of the registered office lentical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any. Add agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered officemany has been notified in writing of this change. |
| NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change of the members of the limited liability company or as of or the operating agreement of the limited liability company or as of or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member ADRIAN ALEXANDRU Printed or typed name of signee | Capitol Corporate Services, Inc. 155 Office Plaza Drive, Suite A Tallahassee ,FL 32301 the laws of the State of Florida, it is hereby efforida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote therwise provided in the articles of organization any. |

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00