11400001541

| (Re | equestor'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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FILED 2016 JAN 26 P 12: 58 SECRETARY OF STATE

> IM27 2016 BRUCE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: January 22, 2016

Order#: 943942/060

Re: STILES-HERNANDEZ DEVELOPMENT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX ___ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

FILL D

2016 JAN 26 P 12: 58

SECRETARY OF STATE

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. | Na | me of the limited liability company: STILES-HERNAN | NDEZ DE | VELOPM | IENT, LLC | | | |
|-----------------|-----------------------------|---|--|---|---|---------------------------------|---|--|
| 2 (| ัลโ | 301 E. Las Olas Blvd. | | (b) 301 E. Las Olas Blvd. | | | | |
| - . (| . - / . | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ (") | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | | | |
| | | Fort Lauderdale FL 33301 | - - | Fort Laug | derdale, FL 33301 | | | |
| | | 01/07/2004 | _ | L0400000 | 01541 | | | |
| 3. | | Date of filing/registration in Florida | 4. | | Document numbe | r | | |
| 5. | (a) | Esposito, Robert | | | | | | |
| ٥. | (a) | Registered Agent and Registered Office shown on the records of the | e Florida l | Dept. of State | e: | | | |
| | | | | | | | | |
| | | 301 E. Las Olas Blvd. Registered Office Address (MUST BE FLORIDA STREET AL | DDRFCC) | | _ | | | |
| | | Registered Office Address (MOST BET EURIDA STREET AL | <u> </u> | | | | | |
| | | Fort Lauderdale , FL | 33301 | | _ | | | |
| (b) | (b) | Corporation Service Company | | | _ ZZ | 2011 | | |
| | | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u> | Office add | ress: | | 2016 JAN | | |
| | | 1201 Hays Street | | | HASSE | M 26 | To the state of | |
| | | NEW Registered Office Address: | | | 변수 수업 2014 | D 12: | | |
| | | | | | | Ω Ω | | |
| | | Tallahassee, FL_ | 32301 | | 7 | <i>U3</i> | | |
| the age was the | cha nt v s/we arti | imited liability company is not organized under the lawsinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liabete accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pligations of my position as registered agent as provided ely reflect a change in the registered office address, I he | he regist bility con the limi imited li Dona | ered officenpany, it is ted liability con a Priebe, A | te and the business is hereby confirmed ty company or as of mpany. Authorized Person Printed or typed name active. I further as | office of that therwise of sign | of the registered he change(s) se provided in | |
| noi | <i>1</i> 71е | a in writing of this change. | | | irby, Assistant Vi | | | |

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