## 104000013492

(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:
L. SELLERS
AUG 1 22008
EXAMINER

Office Use Only



200134138832

08/11/08--01032--013 \*\*25.00

PILED

08 AUG 11 AM 8: 43

SECRETARY OF STATE
ALLAHASSEE FIRE



## 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:

8/7/2008 FLORIDA

REP UNIT: CV

**CWI INVESTOR HOLDINGS TWO,** 

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 #15057 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.

## 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. The name of the limited liability company is: <u>CWI INVESTOR HOLDINGS TWO, LLC.</u>
2. The mailing address of the limited liability company is :
8655 S. Priest Dr., Tempe, AZ 85284
2/19/2004 L04000013492 3. Date of filing/registration in Florida 4. Document number
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:
Grant T. Downing Name
222 W. Comstock Avenue, Ste. 101 Address
Winter Park, FL 32789 City, State and Zip
6. The name and address of the new registered agent and/or office:
CAPITOL CORPORATE SERVICES, INC. Name
155 OFFICE PLZ DR STE A  Florida street address (P.O. Box NOT acceptable)
TALLAHASSEE FL FL 32301
City, State and Zip
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.
Signature of a member or authorized representative of a member)
John E. Cark
(Printed or typed name of algoce)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.
(Signature of Registered Agent) Protonio Care Agent Secretary on Bloball of Coulty Companie Sentings Inc.
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00
NHS18 (8/05)