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ACCOUNT NO. : I2000000195

REFERENCE : 200010 4708161

AUTHORIZATION

COST LIMIT

ORDER DATE : July 1, 2014

ORDER TIME : 8:18 AM

ORDER NO. : 200010-015

CUSTOMER NO: 4708161

CHANGE OF AGENT

NAME: ST. ANDREWS NORTH LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62925

EXAMINER:

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.

2. (a)	6935 N. Wickham Road	(l	o/o lmt	perial Sterling Ltd			
2. (2)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	('	,, <u> </u>	Mailing address of limited (Note: MAY BE POST			
	Melbourne, FL 32940		287 Bow	man Avenue, 2nd Floo	r		
			Purchas	e, NY 10577			
	06/02/2004	_	L0400002	22047			
3.	Date of filing/registration in Florida	4.		Document number			,
5. (a)	C T Corporation System						
` `	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Stat	e;			
	1200 South Pine Island Road						
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS	2	_			
	Plantation , FL	33324		-	5 .0	ب	
(b)	Corporation Service Company				ECRE	4 JUL 20	
(*)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	_	IAS IAS	2	ニン
					₹Y I	332	
	1201 Hays Street			_		AH II:	
	NEW Registered Office Address:				STA SRA	ري -:	
					AON	9	
	Tallahassee , FL	32301		<u></u>			
the chagent was/w	limited liability company is not organized under the lavange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liater authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the registability co of the lim	stered offic impany, it i ited liabilit	e and the business offices shereby confirmed that you company or as other	ce of the r at the char	egiste ige(s)	
		Jerro	old Levy				
Signa	ature of a member of authorized representative of a member			Printed or typed name of	signee	-	
provis the ob to mer	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I h d in writing of this change.	ee to act perform d for in C hereby co	in this cap ance of my Chapter 602 onfirm that	acity. I further agree i duties, and I am famili 5, F.S. Or, if this docu the limited liability con	to comply ar with ar ment is be mpany ha	with to nd acc ing fil s been	he epi ed
Éx	nily Star		Emily	Grav			
Signati	are of Registered Agent Corporation Service Company	BY:	Asst. Vice	President			

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