## L040000024023

(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



900167302529

TO ACKNOWLEDGE SUFFICIENCY OF FILING SHOLLY WOLLD STATE STATE STATE STATE STATES TO STATE STATES STATE

B. KOHR

FEB 1 8 2010

EXAMINER





ON SERVICE COMPANY.				
ACCOUNT NO. : I2000000195				
REFERENCE : 287631 7468825				
AUTHORIZATION: Spellice man 6	O.C.			
COST LIMIT : \$ 25.00	GE CAN			
ORDER DATE : February 17, 2010	CORPU			
ORDER TIME : 9:24 AM	7.5.			
ORDER NO. : 287631-085	ع			
CUSTOMER NO: 7468825				
CHANGE OF AGENT				
NAME: RELIANCE LOVENLUND FLORIDA 2 LLC				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY  XXX PLAIN STAMPED COPY				
CONTACT PERSON: Heather Chapman EXT# 2908				

EXAMINER:

## 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.	Nai	ne of the limited liability company: RELIANCE-	LOVENLUND FLORIDA 2, LLC 🤞 🤄			
2.	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	LOVENLUND FLORIDA 2, LLC 6  20 Battery Park Avenue, Suite 305  Asheville, NC 28801			
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	20 Battery Park Avenue, Suite 305 Asheville, NC 28801			
03	3/3(	0/2004	L04000024023			
3.	Dat	e of filing/registration in Florida	1. Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
		Registered Agent:	Robert O. Jackson			
		Registered Office Address:	805 E. Broward Boulevard			
			Sutie 200 Ft. Lauderdale, FL 33301			
	(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:					
		NEW Registered Agent:	Corporation Service Company			
	NEW Registered Office Address:		1201 Hays Street			
(MUST BE FLORIDA STREET ADDRESS)			Tallahassee ,FL 32301			
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)						
		a Lozada, Authorized Person or typed name of signee)				
I h con am F.S cor By (Sig	nerei nply fam 5. C nfirm C gnatu	by accept the appointment as registered agent and agent with the provisions of all statutes relative to the provisions of all statutes relative to the providing with and accept the obligations of my position of this document is being filed to merely reflect a contact the limited liability company has been notified importation Service Company (Contact of Registered Agent) Grace E. Kirby, Assistant VP	ree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.			

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