LD4000026255

(Re	equestor's Name)					
(Address)						
(Address)						
(Cit	ry/State/Zip/Phone	÷#)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
'AUG 2 9 2012						
L. SELLERS						

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COVER LETTER

	egistration Sec ivision of Corp		ons	·			
SUBJEC	Т:	CSI	Realty In	vestme	nt,	LLC	
Name of Limited Liability Company							
Dear Sir o	or Madam:						
The enclo	sed Registere	d Age	nt/Registered O	ffice Cha	inge an	nd fee(s) are submitted for filing	g.
Please ret	urn all corresp	onder	nce concerning	this matte	er to th	ne following:	
		Marl	(Johnson				
	N	ame of	Person				
		CSI	Realty/In	vestme	nt,	LLC	
<u></u>	F	irm/Con	npany				
٠.		453	South Main	n Stre	et		
		Addres	s				
		Att	leboro, MA	0270	3		
	City/S	State and	l Zip Code				
					gspe	cialists.com	
E-mai	l address: (to be us	ed for fi	iture annual report n	otification)			
For further information concerning this matter, please call:							
		Mar)	Johnson	at (_50	8	222-2377	
	Name of Pe	erson				rea Code & Daytime Telephone Number	
S	reet/cour	IER A	ADDRESS:		MAIL	LING ADDRESS:	
Registration Section		Registration Section					
Division of Corporations		Division of Corporations					
	lifton Building		~· ·			Box 6327	
	661 Executive Callahassee, Flori				Tallah	nassee, Florida 32314	
		•	or the followin	g amoun	ıt:		
₹	1825 Filing Fe	.p		-	7 \$55	Filing Fee & Certified Copy	

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.

 Name of the limited liability company: <u>CSI Realty</u> 	Investment, LLC
2. (a) Principal office address of limited liability company:	1600 N. Powerline Rd
(Note: MUST BE STREET ADDRESS)	Pompano Beach, FL 33069
(b) Mailing address of limited liability company:	453 South Main St
(Note: MAY BE POST OFFICE BOX)	Attleboro, MA 02703
03/30/2004	L04000026255
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	
Registered Agent:	Abhijit Tipnis
Registered Office Address:	701 Bluebird Lane
	Plantation, FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Abhi Tipnis
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1600 N. Powerline Rd
(MOST BE FLORIDA STREET ADDRESS)	Pompano Beach, FL F 3069
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identicability company; it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company. Signature of aniember of authorized representative of a member Mark A. Johnson Printed or typed name of signee I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the profund I am familiar with and accept the obligations of my possible to the provisions of the provision	orida street address of the registered office cal. Or, in the case of a Horida limited was/were authorized by an affirmative vote vise provided in the articles of organization
Signature of Registered Agent	

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