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DIVISION OF CORE ORATION

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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: March 25, 2015

Order#: 540425/018

Re: GRANDE HARBOR GROUP LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

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:Janis M. Smith 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

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	ame of the limited liability company: GRANDE HAS	RBOR GRO	ROUP, LLC	_
2	(a)	7995 Mahogany Run Lane	(b)	b) 7995 Mahogany Run Lane	
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(8)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	_
		Naples FL 34113		Naples, FL 34113	_
		06/21/2004		L04000046304	_
3.		Date of filing/registration in Florida	4.	Document number	
5.	(a)	William G. Morris			
٥,	(α)	Registered Agent and Registered Office shown on the records of	of the Florida	la Dept. of State:	
		247 N COLLIER BLVD, Suite 202			
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
				5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
		Marco Island , F	L 34145	5 N S	,
				그 6절년 요한	-
	(b)	Corporation Service Company			4
		Enter name of NEW Registered Agent and/or NEW Register	ed Office add	ddress: يُظْ يَكُمْ الْعَلَيْمُ الْعِلْمُ الْعَلَيْمُ الْعَلَيْمُ الْعَلَيْمُ الْعَلَيْمُ الْعَلِيمُ الْعَلِيمُ الْعَلَيْمُ الْعَلِيمُ الْعَلِيمُ الْعَلِيمُ الْعَلِيمُ الْعَلِيمُ الْعَلِيمُ الْعَلِيمُ الْعِلْمُ الْعِيمُ الْعِلْمُ الْعِلْمِ الْعِلْمُ لِلْعِلْمُ الْعِلْمُ الْعِلْمُ الْعِلْمُ الْعِلْمُ الْعِلْمُ الْعِلْمُ عِلَيْهِ مِلْمُ لِلْعِلْمُ الْعِلْمُ الْعِلْمِ الْعِلْمُ الْعِلْمِ الْعِلْمُ الْعِلِمُ الْعِلْمِ الْعِلْمِ لِلْعِلْمِ الْعِلْمِ لِلْعِلْمِ الْعِلْمِ لِلْعِلْمِ الْعِل	
		1201 Hays Street			
		NEW Registered Office Address:			
		Tallahaana	20001		
		Tallahassee , F	L 32301	<u>1 </u>	
th ag w	e cha ent v as/w	imited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the regis liability co s of the limi	istered office and the business office of the registere company, it is hereby confirmed that the change(s) mited liability company or as otherwise provided in	d
			Don	na Priebe, Authorized Person	
	Sign			Printed or typed name of signee	
ne	nijie √	Litie Grange.		ct in this capacity. I further agree to comply with the nance of my duties, and I am familiar with and accep Chapter 605, F.S. Or, if this document is being filed confirm that the limited liability company has been	? ot d
8	gratu	ire Registered Agent Corporation Service Company	BY: Sy	Sylvia Queppet, Asst. Vice President	

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