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(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL.		
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(Document Number)				
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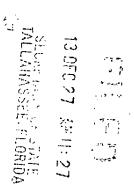
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COVER LETTER

TO: Registration Section **Division of Corporations** ZP&W Land Holdings II, LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Leon N. Patricios Name of Person ZP&W Land Holdings II, LLC Firm/Company 312 Minorca Ave. Address Coral Gables, FL 33134 City/State and Zip Code lpatricios@zpwlaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Leon N. Patricios Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 Tallahassee, Florida 32314 2661 Executive Center Circle Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$55 Filing Fee & Certified Copy □ \$25 Filing Fee

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.	Name of the limited liability company: ZP&W Land Holdings II, LLC				
2	(a)	Principal office address of limited liability company	· 312 Minorca Ave		
ے.	(4)	(Note: MUST BE STREET ADDRESS)	Coral Gables, FL 33134		
	(b)	Mailing address of limited liability company:	312 Minorca Ave		
	(~)	(Note: MAY BE POST OFFICE BOX)	Coral Gables, FL 33134		
02/16/2005		95	L05000016099		
3.	Dat	e of filing/registration in Florida	4. Document number		
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
		Registered Agent:	David J. Winker		
		Registered Office Address:	312 Minorca Ave		
		registered office readiess.	Coral Gables, FL 33134		
	(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Leon N. Patricios		
		NEW Registered Office Address:	312 Minorca Ave		
		(MUST BE FLORIDA STREET ADDRESS)	Coral Gables, FL 33134		
			,FL		
an lia th th	nfiri d the abilit e me e ope	imited liability company is not organized under the la ned that after the change or changes are made, the Flore business office of the registered agent will be identify y company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise erating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited		
Le	on N. F	Patricios	Filler Attack Services		
Pr	inted	or typed name of signee			
co ar Ci aa	mpl d I d hapte ldres	by accept the appointment as registered agent and as with the provisions of all statules relative to the prosim familiar with and accept the obligations of my poser 608, F.S. Or of this document is being filed to ments, I hereby confirm that the limited liability company	gree to act in this capacify—I further agree to per and complete performance of my duties, sition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.		
Si	gnatu	e of Registered Agent			