## LU5000052503

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ACCOUNT	NO.	:	120000000195
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REFERENCE: 027083

7861660

AUTHORIZATION

COST LIMIT :

ORDER DATE: December 15, 2011

ORDER TIME : 10:10 AM

ORDER NO. : 027083-020

CUSTOMER NO: 7861660

## CHANGE OF AGENT

NAME: COURTNEY GATE PARKWAY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce -- EXT# 2919

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.

	,~ <u>`</u>
1. Name of the limited liability company: COURTNEY GAT	E PARKWAY, LLC
2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Altamonte Springs, FL 32714
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	237 S. Westmonte Dr., Ste 140 Altamonte Springs, FL 32714
05/26/2005	L05000052503
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	Corporation Company of Orlando
Registered Office Address:	300 South Orange Avenue Suite 1000 (DTO) Orlando, FL 32801
	Corporation Service Company
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cashereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company.  Maure Catter	address of the registered office and the business see of a Florida limited liability company, it is an affirmative vote of the members of the limited
Signature of a member or authorized representative of a member)	
Maureen Cathell, Authorized Person (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statules relative to the prop am familiar with and accept the obligations of my position a F.S. Or, if this document is being filed to merely reflect a ch confirm that the limited liability company has been notified to	ree to act in this capacity. I further agree to per and complete performance of my duties, and I is registered agent as provided for in Chapter 608, ange in the registered office address, I hereby in writing of this change.
By: Syria Ousport	ylvia Queppet, Asst. Vice President

FILING FEE: \$25.00

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314