## Lococssall

(Requestor's Name)							
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PICK-UP	☐ WAIT	MAIL					
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(Document Number)							
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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: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: January 22, 2016

Order#: 943942/030

Re: OAK TREE LANDING GP, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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:Lindsey Lockard 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	me of the limited liability company: OAK TREE LA	NDING G	P, LLC			
2	(a)	301 E Las Olas Boulevard	(h	) 301 E I	Las Olas Boulevard		
۷. (	(u)	Principal office address of limited liability company:	(5	Mailing address of limited liability company:			
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFF	ICE BOX)	
		Suite 800		Suite 800			
		Ft. Lauderdale FL 33301		Ft. Laud	derdale, FL 33301		
		09/08/2006	_	L060000	88726		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	Stiles Corporation			_		
		Registered Agent and Registered Office shown on the records of	f the Florida	Dept. of Stat	te:		
		301 E Las Olas Boulevard					
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	7)	<del></del>		
		registered Office Address [hardar 22, 20 MD/201122]	210 D N D 00	2	ASS	<u>_</u>	
		Suite 800		***		<u>ග</u>	
		Ft. Lauderdale, Fl	L <u>33301</u>	<u> </u>	CRETARY AHASSEI	JAN 2	
						On green	
·	(b) Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered O				_		
				<u>dress</u> :			
		•			R		
		1201 Hays Street			5류 *	io .	
		NEW Registered Office Address:			~ · · · · · · · ·		
					_		
		Tallahassee , F	լ_ 32301		_		
		•			_		
the age	cha ent v s/we	imited liability company is not organized under the latinge or changes are made, the Florida street address owill be identical. Or, in the case of a Florida limited lere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the reginability control  of the lim	stered offic ompany, it i nited liabilit	ce and the business office o is hereby confirmed that th ity company or as otherwise	of the registered se change(s)	
1110					•		
_		tue of a member or authorized representative of a member	Dor	ia Priebe, A	Authorized Person Printed or typed name of signs		
	igna	·			· ·		
pro the	ovisi obl mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and completing ations of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.	gree to act e perform ed for in ( hereby c	' in this cap ance of my Chapter 60. onfirm that	pacity. I further agree to c duties, and I am familiar v 15, F.S. Or, if this documer t the limited liability compo	omply with the with and accept it is being filed any has been	
		Drace Cokuble					
Sig	gnatu	re of Registered Agent Corporation Service Company	BY: G	race E. Ki	irby, Assistant Vice Pres	ident	

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