## 07000097172

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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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EXAMINER



ON SERVICE COMPANY.		
ACCOUNT NO. : 12000000195		
REFERENCE : 746356 7828033		
AUTHORIZATION: Symbolic man		
COST LIMIT : \$ 25.00		
REFERENCE: 746356 7828033  AUTHORIZATION: SPEEDER TO THE STREET TO THE S		
ORDER TIME : 9:16 AM		
ORDER NO. : 746356-002		
CUSTOMER NO: 7828033		
CHANGE OF AGENT		
NAME: CSI FISHER ISLAND PROPERTY MANAGEMENT, LLC		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XXX PLAIN STAMPED COPY		
CONTACT PERSON: Matthew Young EXT# 2962		
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.

1. Name of the limited liability company:	CSI FISHER ISLAND PROPERTY MANAGEMENT, LLC
	ability company: 6700 North Andrews Avenue
(b) Mailing address of limited liability of (Note: MAY BE POST OFFICE)	company:6700 North Andrews Avenue 💢 🧍
09/24/2007	L07000097192
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered O	ffice shown on the records of the Florida Dept. of State:
Registered Agent:	United Corporate Services Inc.
Registered Office Address:	9200 South Dadeland Boulevard Suite 508 Miami FL 33156
(b) Enter name of <u>NEW Registered Ag</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:  (MUST BE FLORIDA STREET A	cent and/or NEW Registered Office address:  Corporation Service Company  1201 Hays Street
MOST BET EURIDA STREET A	Tallahassee ,FL 32301
that after the change or changes are made, t	ized under the laws of the State of Florida, it is hereby confirmed the Florida street address of the registered office and the business al. Or, in the case of a Florida limited liability company, it is the authorized by an affirmative vote of the members of the limited in the articles of organization or the operating agreement of the
Maureen Cathell, Authorized Person (Printed or typed name of signee)	······································
I hereby accept the appointment as register comply with the provisions of all statutes ream familiar with and accept the obligations F.S. Or, if this document is being filed to me confirm that the limited liability company hereby company hereby company hereby company hereby company	red agent and agree to act in this capacity. I further agree to lative to the proper and complete performance of my duties, and I of my position as registered agent as provided for in Chapter 608, erely reflect a change in the registered office address, I hereby as been notified in writing of this change.

(Signature of Registered Agent) Sylvia Queppet, Asst. VP

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

FILING FEE: \$25.00