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COVER LETTER

TO: Registration Section Division of Corporations		
1700 RINEHART LLC SUBJECT:		
	Name of Limited I	Liability Company
Dear Sir or Madam:		
The enclosed Registered Agent/Registered	Office Change and	I fee(s) are submitted for filing.
Please return all correspondence concernir	ng this matter to the	following:
Panayes J. Dikcou		
Name of Person		
1700 RINEHART LLC		
Firm/Company	 	_
1615 California Street, Suite 707		
Address		
Denver, CO 80202		
City/State and Zip Co	de	
mschooner@dikeou.com		
E-mail address: (to be used for future	annual report notif	ication)
For further information concerning this ma	itter, please call:	
Mary Schooner	303 at (825-9192
Name of Person	w. (Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the follow	ving amount:	
■ \$25 Filing Fee	a s	55 Filing Fee & Certified Copy
INHS18 (2/14)		

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.

Na	une of the limited liability company: 1700 RINEHART	LLC			
	1700 RINEHART LLC		h١		
(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 1615 California Street, Suite 707	`	(b) Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)		
	Denver, CO 80202				
			_		
	04/16/2008		ĻOš	8000038417	
	Date of filing/registration in Florida	4.		Document nu	imber
4.33	James I. Hoctor				
(a)	Registered Agent and Registered Office shown on the records of	the Floric	ta Dep	of State:	
	Lowndes				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>:s)</u>		201 A
	215 N Eola Drive				1 JL A
	Orlando, FL	32801			2024 JUN 12 PM
		·			12 (SSI (SSI
(b)	Jeffrey S. Weiss, Esq				E P
, . ,	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddrev	<u>s</u> :	F (2)
	Garganese, Weiss, D'Agresta, & Salzman P.A.				2024 JUN 12 PM 2: 34 TÄLLÄHASSEE, FLORIDA
	NEW Registered Office Address:				ŕ
	11) N. Orange Avenue. Suite 2000				
	Orlando, FL	32802-	2873		
ange ent v	imited liability company is not organized under the later or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liter authorized by an affirmative vote of the members of the Norganization or the operating agreement of the	registe ability c of the li	red o :ompa mited	any, it is bereby confi I liability company or	rmed that the change(s)
	1 2 Milestone			J. Dikeou, Manager	
	ture of a member or authorized representative of member				d name of signee
ovisi e obl	by accopt the appointment as registered agent and age ions of all statute-relative to the proper and complete ignious of my position as registered agent as provide ely reflect schange in the registered office address. I fan writing of pas change.	Herrin	Cb.a	over 605 F.S. Or iti	his document is being tile
· Rarer	de at Reported Agent				

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