•							
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(Address)							
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(Business Entity Name)							
(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: Janis M. Smith jsmith2@cscinfo.com

Date: January 22, 2015

Order#: 468888/024

Re: MARDI GRAS BW DEVELOPMENT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

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: Janis M. Smith

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.

r i	oriad	.						
1.	Na	me of the limited liability company: MARDI GRAS B	W DEV	/ELOPMEN	IT, LLC			
2	(a)		(ì)				
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (.	,,	Mailing address of limited (Note: MAY BE POST	•		
		2020 Ponce de Leon Boulevard, Suite 907	_					
		Coral Gables, FL 33134	_					
		06/05/2009		L090000	54790			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	Ronald R. Fieldstone, Esq.			_			
		Registered Agent and Registered Office shown on the records of th	e Florida	a Dept. of Stat	te:			
					_			
		Registered Office Address (MUST BE FLORIDA STREET A)	<u>DDRESS</u>	<u>D</u>				
		200 S. Biscayne Boulevard, Suite 3600	·					
		Miami , FL	33131	1				
			- <u>-</u>		_	T _S		
	(b)	Corporation Service Company					5	
	. , .	Enter name of NEW Registered Agent and/or NEW Registered C	ffice ad	dress:	_	RETARY OF STATE AHASSEE, FLORID	JAN	
						AR SSI	26	==3
		1201 Hays Street			_	EE, O	P	E5
		NEW Registered Office Address:				FE ST		
						SRA	£	
				<u> </u>	-	EΑ	9	
		Tallahassee ,FL	32301		_			
the ag	e char ent was/we	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited liabre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regi: oility co the lim	stered offic ompany, it i iited liabilit	e and the business offi is hereby confirmed the ty company or as other	ice of the r at the char	registe nge(s)	ered
		/ Lowell D. Plotkin	Low	ell D. Plotk	in, Authorized Person			
9	Signat	ure of a member or authorized representative of a member			Printed or typed name of	signee	_	_
pro the to no	ovisio e obli mere tifiea	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change.	erform for in (creby co	ance of mỹ Chapter 60: onfirm that	duties, and I am famil 5, F.S. Or, if this docu the limited liability co	iar with a ment is be mpany ha	with the same of t	the cept led 1
Si	gnatur	e ARegistered Agent Corporation Service Company	BY: S	ylvia Que	ppet, Asst. Vice Pres	sident		
Si	gnatur	e Registered Agent Corporation Service Company	BY: S	ylvia Que	ppet, Asst. Vice Pres	sident		

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