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TALLAHASSEE, FLORIDA

COVER LETTER

Division of Corpo			
Green Doi	phin Holdings, LLC		
	Name of	Limited Liab	ility Company
Dear Sir or Madam:			
The enclosed Registered A	gent/Registered Office C	hange and fe	e(s) are submitted for filing.
Please return all correspor	dence concerning this ma	itter to the fol	llowing:
Donna Colavito			
N	ame of Person		•
Granite Associates, Ir	ıc.		
Fi	rm/Company		•
225 Banyan Boulevar	d, Suite 130		
	Address		•
Naples, FL 34102			
City/S	State and Zip Code		•
dcolavito@granitelp.c	om		
E-mail address: (to b	e used for future annual re	eport notifica	ition)
For further information co	ncerning this matter, pleas	se call:	
Louis J. Boyd	at	239	228-6505
Name of I			Area Code & Daytime Telephone Number
STREET/COUR Registration Section Division of Corpo Clifton Building 2661 Executive Control	on rations enter Circle	Regis Divis P.O. 1	LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314
Enclosed is a che	ck for the following amo	ount:	
☑ \$25 Filing Fee		\$ 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.

1.	Na	me of the limited liability company: Green Dolphin	n Hold	nit	gs, LLC				
2. ((a)	c/o Granite Associates, LP		(b)	c/o Gra	nite Associates,	LP		
2. (ω,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	 '	(0)		Mailing address of limit (Note: MAY BE PO			-
		225 Banyan Boulevard, Suite 130			225 Bar	nyan Boulevard,	Suite 1	130	
		Naples, FL 34102	_		Naples,	FL 34102			
		August 26, 2009		Ĺ	.090000	82513			
3.		Date of filing/registration in Florida	4.	_		Document number	<u>, </u>		
5.	(a)	United Corporate Services, Inc.							
٥.	(u)	Registered Agent and Registered Office shown on the records of t	he Flori	da I	Dept. of Stat	te:			
		9200 South Dadeland Blvd.							
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						_	Ä.	<u>N</u> a	
		Suite 508				_			
		Miami , FL	3315	6		_	KÉ JA	H LYM BIRZ	1
(b)	Granite Associates, Inc.					ASSEE, FLORIDA	H2 4	FE
·	. ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office a	ddı	ress:	_	<u>0</u>	ယ္	
		225 Banyan Boulevard				_	XOX	44	
		NEW Registered Office Address:				_			
		Suite 130				-			
		Naples, FL	3410	2		_			
the ager was the	cha nt w we arti gnat	imited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization or the operating agreement of the number of a member or authorized representative of a member on a first of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered of the proper and complete in the registered of the provided the proper and complete in the registered of the provided the proper and complete in the registered of the provided the proper and complete in the registered of the provided the proper and complete in the registered of the proper and complete in the registered of the proper and complete in the proper	the regibility of the limited LC	gist con mit l lia Dui	ered officenpany, it is the desired liability constants. Boyens I. Boyens In this cap	e and the business of is hereby confirmed ty company or as of mpany. d Printed or typed name pacity. I further agr	office of that the herwise of signed	the reg e change provide	istered e(s) ed in
to n	Jieo Lo	un Brul	iereby	coi	nfirm that	the limited liability	compa	ny has t	een .
Sig (/	atu:	re of Registered Agent							
V		Division of Corporations • P.O. E				ssee, FL 32314			