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SECTION OF THE SELECT

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CSC - WILMINGFON
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 janis.smith@cscglobal.com

Date: May 26, 2015

Order#: 630558/049

Re: KA FAMILY INVESTMENTS, 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.

1.	Na	me of the limited liability company: KA FAMILY INV	ESTMEN	NTS, LLC	
2.	(a)	255 Alhambra Circle, Suite #600	_ (b))	
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Coral Gables, FL 33134	_		
		09/23/2009		L0900009	01897
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	C T Corporation System			_
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					e:
		1200 South Pine Island Road			_
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
					5
		Plantation	22224		
		Plantation , FL	33324		. 13 (1) 8 3 (m
	(b)	Corporation Service Company			22 (Table 1) (Ta
	(~)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	lress:	8: 4 - E
					5 3
		1201 Hays Street			- -
		NEW Registered Office Address:			
					-
		Tallahassee , FL	32301		_
the ag	e cha ent v as/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regis bility co f the lim	tered office mpany, it is ited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
_		12/2	Don	a Priebe, A	uthorized Person
	~	ture of a member or authorized representative of a member			Printed or typed name of signee
pr th to no	ovisi e obl merc tified	by accept the appointment as registered agent and agroups 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 had in writing of this change.	performa d for in C hereby co	ance of my Ehapter 605 Infirm that	duties, and I am familiar with and accept i, F.S. Or, if this document is being filed the limited liability company has been
Si	gnate	re of Registered Agent Corporation Service Company	BY: Sy	ivia Quep	pet, Asst. Vice President