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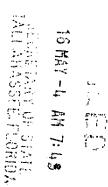
(Requestor's Name)								
(Address)								
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: May 3, 2016

Order#: 118127/006

Re: MATTONI HOLDINGS, 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:Grace Kirby 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: MATTONI HOL	DINGS, I	_LC				
2.	(a)	_1401 Brickell Avenue, Suite 530		(b)1401 Brickell Avenue, Suite 530				
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(*	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		Miami FL 33131		Miami	FL	33131		
		12/10/2009		L090001	17738			
3.		Date of filing/registration in Florida	4.		Document nu	mber		
5.	(a)	Mattoni Holdings						
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
		1401 Brickell Avenue						
		Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u>}</u>	_			
		Miami , FL	33131		_	ASSE T-4		
	(b)	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> 1201 Hays Street	l Office add	lress:	_	AH 7:40		
		NEW Registered Office Address:			_			
		<u>Tallahassee</u> , FL	32301		_			
the age wa	cha ent w s/we	mited liability company is not organized under the lange or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited line authorized by an affirmative vote of the members of the operating agreement of the	f the regis ability co of the limi	tered offic mpany, it ited liabili	e and the busin is hereby confir ty company or a	ess office of the registered med that the change(s)		
		Xel E. Whee	Jill C	ilmi, Autho	orized Person			
I h pro the to i noi	eret visio obli nere ifiea	ure of a member or authorized representative of a member on accept the appointment as registered agent and agnoss of all statutes relative to the proper and complete gations of my position as registered agent as provide by reflect a change in the registered office address, I is more time of this change. See those Agent Corporation Service Company	performa d for in C hereby co	ince of my hapter 60, nfirm that	Printed or typed pacity. I further duties, and I and 5, F.S. Or, if the limited liab	r agree to comply with the m familiar with and accept iis document is being filed bility company has been		
	,	Corporation Service Company	וט . ז נו	acc 15. ICI	roy, Asst. vic	o i resident		

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