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December 24, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GIRAFFAS CAUSEWAY SQUARE, LLC 201 SQUTE BISCAYNE BLVD SUITE 1200 MIAMI, FL 33131

SUBJECT: GIRAFFAS CAUSEWAY SQUARE, LLC

REF: L09000121405

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Floi company submits the following statement in order to che both, it the State of Florida.	inge ils registered office or regi	immed Havidiy stered agent, or Des
1. Name of the limited liability company: GIRAFFAS CA	USEWAY SQUARE, LLC	
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)		Or C
	Wiamit () (01/02/33/32	<u> </u>
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1444 Biscayne Blvd Suite 216 Miami, Florida 33132	
12/22/2009	L09000121405	, , , , , , , , , , , , , , , , , , ,
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept	of State:
Registered Agent:	ZAYAS MORILLAS LLC	
Registered Office Address:	6303 BLUE LAGOON DR, SUITE 400	
-	MJAMI, FL 33126	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW</u> Registered Agent:	Business Filings Incorporated	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	515 E. Park Avenue	
MOST OF LOND STREET THE ENGLISH	Tallahassee	FL32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idealiability company, it is hereby confirmed that the change the members of the limited liability company or as otherwise operating agreement of the limited liability company.	Florida street address of the regulatical. Or, in the case of a Floridal by an afficient by an affi	stered office la limited firmative vote of
Ana Paula Oliviera		
Printed or typed name of signee	t dan an an an alter the community of	C V
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and occept the obligations of my in Cipper 605, F.S. Or, if this document is being filed to hadress, I hereby confirm that the limited liability compand.	I ngree to act in this capacity. I proper and complete performant consistered agent as proving the regiment in writing complete in writing complete the regiment.	nither agree to e of mr auties, rovided for in ristered office of this chimge.
Mark Williams, AVY Business Pilings Incorp	orated .	
Division of Corporations, P.O. Box	6327, Taliahassee, FL 32314	

FILING FEE: \$25.00