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Division of Corporations

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LLC REGISTERED AGENT CHANGE VCH RANCH, LLC

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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 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.

(a)	with Ranch, LLC		(b)	(b) VCH Ranch, LLC	
(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	<u>_</u>	\- /	Mailing address of limited liability comparties: MAY BE POST OFFICE BOX	
	3013 NW County Road 661 A			3013 NW County Road 661 A	
	Arcadia, FL 34266-9023	_		Arcadia, FL. 34266-9023	
	03/02/2010		I	L10000023915	
	Date of filing/registration in Florida	— 4.	_	Document number	
	William R Lowman, Jr, Esq				
(a)	Registered Agent and Registered Office shown on the records o	f the Flor	ida l	da Dept. of State:	
	William R Lowman, Jr, Esq			~ ¹	
	Registered Office Address MUST RE PLORIDA STREET	ADDRE	322		
	1000 Legion Place, Suite 1700			1020 MAY 12	
	Orlando F	L_32801			•
	Nancy Lynn Hollingsworth Mills	2:			
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			address: & & & & & & & & & & & & & & & & & &	
	Nancy Lynn Hollingsworth Mills				
	NEW Registered Office Address:	_			
	3013 NW County Road 661 A				
	Arcadia	34266	-90	-9023	
ent visioner	imited liability company is not organized under the less of changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the florida limited ere of the members of the proper or authorized representative of a member by accept the appointment as registered agent and aging of all statutes relative to the proper and completely reflect a change in the registered agent as provided in writing of this stange.	liability of the le limite gree to de perfor le led for il	cor imi d li land	company, it is hereby confirmed that the change imited liability company or as otherwise provided liability company. ancy Lynn Hollingsworth Mills Printed or typed name of signee cet in this capacity. I further agree to comply we have a familiar with and the compliance of the complex cet.	ed in

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