Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000193990 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : SPIEGEL & UTRERA, P.A.

Account Number : FCA000000001

: (305)854-6000

Phone Fax Number

: (305)860-2076

\*\*Enter the email address for this business entity to be used for Tuture annual report mailings. Enter only one email address please. \*\*

Email Address:

#### LLC REGISTERED AGENT CHANGE PASSAGE PEAK MANAGEMENT, LLC

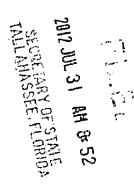
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

# STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT



#### **OF**

### PASSAGE PEAK MANAGEMENT, LLC

Pursuant to the provisions of sections 608.416 or 608.508, 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.

FIRST: The name of the company PASSAGE PEAK MANAGEMENT, LLC.

SECOND: The principal office address of the company is 2863 1st Avenue South, St. Petersburg, Florida 33712 and the mailing address is Post Office Box 48663. St.

Petersburg, Florida 33743.

THIRD: The date of organization was 21st day of May, 2010. The Company's document

L10000055012.

FOURTH: The name of the registered agent and the registered office address as shown on the

records of the Florida Department of State:

Spiegel & Utrera, P.A. 1840 Southwest 22 Street, 4th Floor Miami, Florida 33143

FIFTH: The name and address of the new registered agent and/or office:

Shanee J. Jones 2863 1<sup>st</sup> Avenue South St. Petersburg, Florida 33712



www.amcrilawycr@.com 1840 CORAL WAY, 4<sup>th</sup> FLOOR, MIAMI, FL 33145 - (305) 854-6000 - (800) 603-3900 - FACSIMILE (305) 857-3700 MAILING ADDRESS - POST OFFICE BOX 450605, MIAMI, FL 33245-0605

112000193990 3

## ACCEPTANCE OF REGISTERED AGENT DESIGNATED IN STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT

Shanee Jones, having a business office identical with the registered office of the Company name above, and having been designated as the Registered Agent in the above and foregoing Statement of Change of Registered Office or Registered Agent, is familiar with and accepts the obligations of the position of Registered Agent under Section 608.4155. Florida Statutes and other applicable Florida Statutes.

Shance J. Jo

SIXTH:

If the Limited Liability Company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida Limited Liability Company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the Limited Liability Company or as otherwise provided in the Articles of Organization or the operating agreement of the Limited Liability Company.

EIGHTH:

This amendment shall be effective upon the filing with the Secretary of State of

Fiorida.

Signed this 30 July 2012.

Signature of a Member of Representative of a Member

12 JUL 31 AH & 52 ECRETARY OF STATE LAHASSEE, FLORIOA

