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ALLAHASSEE ELABIA

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INHS18 (2/14)

TO:	Registration Section Division of Corporations			, .4			
SUBJE	SRRP TALLAHAS	SEE LLC					
5000		Name of	Limited Liab	oility Company			
Dear S	ir or Madam:						
The en	closed Registered Agent/Reg	istered Office Cl	nange and fe	e(s) are submitted for filing.			
Please	return all correspondence co	ncerning this mat	ter to the fol	lowing:			
GEOF	RGE W. HATCH, ESQ.						
	Name of Pe	erson		•			
GUIL	DAY LAW, P.A.						
	Firm/Comp	any		-			
1983 (CENTRE POINTE BLVD	SUITE 200					
	Address	-		-			
TAL1.	AHASSEE, FL 32308						
	City/State and	Zip Code		-			
GEOF	RGE@GUILDAYLAW.C	OM					
l:	-mail address: (to be used fo	r future annual re	port notifica	tion)			
For fur	ther information concerning	this matter, pleas	e call:				
GEOF	RGE W. HATCH, ESQ.	at	850	224-7091			
	Name of Person			Area Code & Daytime Telephone Number			
	Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
	Enclosed is a check for the	e following amo	unt:				
	■ \$25 Filing Fee		□ \$ 55	\$55 Filing Fee & Certified Copy			

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. Nai	me of the limited liability company: SRRP TALLA	AHASS	EE	LLC				
2. (a)		((b)					
, , , 	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	·—- \	(0)	!	Mailing address (Note: MAY	s of limited liabi		
	8477 MIZNER CIRCLE EAST			РО ВОХ	47107			
	JACKSONVILLE, FL 32217			JACKSC	ONVILLE, F	FL 32247		
	07/09/2010		I	.1000007	72680			
3.	Date of filing/registration in Florida	 4.	_		Document n	umber		
5. (a)								
	Registered Agent and Registered Office shown on the records of SUNIL RAJAN	f the Florid	da I	Dept. of State	 c:			
	Registered Office Address (MUST BE FLORIDA STREET	_						
	13300 ATLANTIC BLVD, STE 1907		1	20				
	JACKSONVILLE	32225 L3	· · · ·		_	ALLAY	2023 JUN 28 PH 4: 07	7
(0)	GUILDAY LAW, P.A.				_	ASSE	128	FILE
	Enter name of NEW Registered Agent and/or NEW Registered Office address:							
	GEORGE W. HATCH, ESQ.					FLORIDA	ų: O	
	NEW Registered Office Address:					P		
	1983 CENTRE POINTE BLVD, SUITE 200							
								
	TALLAHASSEE , FI	L_32308	<u> </u>					
Signate I hereb provision the obligation mere notified	mited liability company is not organized under the later changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited life authorized by an affirmative vote of the members of the organization or the operating agreement of the later of organization or the operating agreement of the later of a member of all statutes relative to the proper and complete gations of my position as registered agent as provided in reflect a change in the registered office address, I intwitting of this change.	e register ability c of the lir limited	red formit lia	office and appropriate this cape	d the busines is hereby configured or pany. Printed or specially a further than the p	er waree to co	e regist te chang e provi	ered ge(s) ded in