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RARDONS 105.5.15



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: April 24, 2015

Order#: 584184/220

Re: TWH-PC REAL ESTATE, 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:Janis M. Smith 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.

2. (a) ₋	615 Merrick Ave	·	(b)	
		of limited liability company: STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Westbury	N\ 11590		
	09/24/2010		<u>L1</u>	0000100292
3.	Date of filing/regis	stration in Florida	4.	Document number
5. (a)	C T CORPORATION S	STEM		
	Registered Agent and Registered	Office shown on the records	of the Florida Dept	. of State:
	1200 SOUTH PINE ISLA	ND ROAD		
	Registered Office Address (M	UST BE FLORIDA STREE	T ADDRESS)	
				SE(
	PLANTATION	, I	EI 33304	SECRE TARY OF CO.
	TEMPATION	, 1	L33324	
(b)	Corporation Service Comp	oanv		المسكا بدر
(0)	Enter name of NEW Registered		ed Office address:	PA C
				3: 04 3: 04
	1201 Hays Street			
	NEW Registered Office Address	:		
		· · · · · · · · · · · · · · · · · · ·		
	Tallahassee	,	L 32301	
the cha agent v was/w	ange or changes are made, the will be identical. Or, in the continuation of the contin	e Florida street address case of a Florida limited tive vote of the members	of the registered liability compa s of the limited ne limited liabil	
Signa	iture Camember or authorized rep	resentative of a member	Dona Pri	iebe, Authorized Person Printed or typed name of signee
provisi the obi to mer	by accept the appointment a ions of all statutes relative to ligations of my position as re ely reflect a change in the re d in writing of this change.	o the proper and comple egistered agent as provid gistered office address,	gree to act in the le performance ded for in Chap I hereby confir	his capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605, F.S. Or, if this document is being filed m that the limited liability company has been

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