L11000017337

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SECRETARY DE STATE
TALLEAHASSEE, FLORIDA

MAR 16 2016).BRUCE



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper

ami.casper@cscglobal.com

Date: March 10, 2016

Order#: 044440/035

Re: DONALD J. PLINER OF FLORIDA, 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:Ami Casper

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

2016 MAR IN A 9: 55
SECRETARY OF STATE
ARIANSSEF, FLORIDA

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.	Na	me of the limited liability company: DONALD J. PLII	NER O	F FLORIDA,	LLC
2	(a)	10800 N.W. 97th Street, Suite 103	C	b)	
٥.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Miami, FL 33178	_ _		
		02/09/2011		L110000	17237
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Brian Suflivan			
٥,	(α)	Registered Agent and Registered Office shown on the records of t	he Florid	la Dept. of Stat	e:
		10800 N.W. 97th Street, Suite 103			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>S)</u>	_
		Miami , FL	3317	8	-
	(b)	Corporation Service Company			2016 HAR SECRETALLAHA
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ac	ddress:	
					HASSA F
		1201 Hays Street			AAA) NSSEE
		NEW Registered Office Address:			THAR ILL A CRETARY OF LAHASSEE, FI
					95 e
					10 55 S
		Tallahassee , FL	3230	1	,,,
th ag w th	e cha ent v as/we e arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ian Sullivan	vs of the the reg bility c f the lir limited	e State of Floistered office company, it in	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in inpany.
_	Signat	ture of a member or authorized representative of a member	- 1011	ari Sullivari,	Printed or typed name of signee
I pr th to no	herei ovisi e ohl mere otified	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect a change in the registered office address. I had in writing of this change.	ee to ac perforn I for in sereby c	t in this cap nance of my Chapter 60: confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
S	gnatu	fe of Registered Agent Corporation Service Company	BY: S	Sylvia Quer	opet, Asst. Vice President

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