## Ulddoand

(Requestor's Name)					
(Address)					
(Address)					
(Cit	ty/State/Zip/Phon	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate	s of Status			
Special Instructions to Filing Officer:					
		<u> </u>			

Office Use Only



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FEB 04 2016 S. YOUNG



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: February 1, 2016

Order#: 962286/005

Re: IOA PROPERTIES III, 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.

1.	Na	me of the limited liability company: IOA PROPERTI	IES III, I	LLC	
2	(a)	1855 W. State Road 434	C	b)	
	(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)
		Longwood, FL 32750	<del></del> 		
		03/02/2011	_	L1100002	25901
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	John R. Wick			
J.	(a)	Registered Agent and Registered Office shown on the records of the	the Florid	la Dept. of Stat	_ e:
		1855 W. State Road 434			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					_
					<b>.</b>
					- <u>A</u> 5
		Longwood , FL	3275	0	
	(b)	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:	- A
		Table frame of NEW Registered Agent and/or 14279 Registered	COTTICE 21	<u>uui taa</u> .	그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
		1201 Hays Street			22 <b>5</b>
		NEW Registered Office Address:			- ŞA <b>5</b>
					_
		Tallahassee , FL	3230	1	
th ag w th	e cha gent v as/w e art Sign herc ovisi e obi	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liagre authorized by an affirmative vote of the members of cless of organization and appropriating agreement of the nurse of member and complete in the appointment as registered agent and agriculture of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office address, I in different agent as change in the registered office address, I in the writing of this change.	the regability confidence of the limited	istered offic company, it is mited liability liability cor ona Priebe, A	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in mpany.  Authorized Person  Printed or typed name of signee  pacity. I further agree to comply with the
,,,		I. auene			
S	ignan	re 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