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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. N	ame of the limited liability company: FLAGLER DEV	√ELOPM	ENT COM	PANY, LLC	
2. (a)	C/O FECI	(b) C/O FE	CI	
<i></i> (<i>ta</i>)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	350 NW 1ST AVENUE STE 200		P.O. BC	X 164739	
	MIAMI, FL 33128		MIAMI,	FL 33116	
	06/27/2011		L110000	74983	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)					
5. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	COBB, KOLLEEN O.P. C/O FECI		·		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	
	350 NW 1ST AVENUE STE 200			20 2	
	MIAMI	33128	2024 NOV 25 SECRETAR) 33128		
				TARY (
(b)	Enter name of NEW Registered Agent and/or NEW Registered				
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office a	<u>ldress</u> :	72 = 0	
	Corporation Service Company NEW Registered Office Address: 1201 Hays Street			AHII: 49	
				·	
				_	
	Tallahassee . F	L 32301			
	limited liability company is not organized under the la				
agent was/w	e or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members icles of organization or the operating agreement of the	iability co of the lir	ompany, it nited liabil	is hereby confirmed that the change(s) ity company or as otherwise provided in	
	/s/ Kolleen Cobb	Ko	lleen Cobb	, Authorized Person	
Signa	ature of a member or authorized representative of a member			Printed or typed name of signee	
I here provis the ob- to mer notifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, led in writing of this change.	gree to ac e perform ed for in hereby c	t in this ca cance of mi Chapter 60 onfirm tha	pacity. I further agree to comply with the y duties, and I am familiar with and accept 95, F.S. Or, if this document is being filed at the limited liability company has been	
				Kirby, Asst Vice President	
Signati	are of Registered Agent				