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EXAMINER



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ION SERVICE COMPANY.			
ACCOUNT NO. : I2000000195			
REFERENCE : 135502 4720460			
AUTHORIZATION: Smelle le man			
COST LIMIT : \$25'.00			
ORDER DATE: March 19, 2012  ORDER TIME: 12:23 PM			
ORDER 11ME : 12:23 PM  ORDER NO. : 135502-045			
ORDER NO. : 135502-045			
CUSTOMER NO: 4720460			
CHANGE OF AGENT			
NAME: 6700 NW 10TH PLACE OPERATIONS LLC			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Stephanie Milnes EXT# 2920			
EXAMINER:			



## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: 6700 NW 10TH	I PLACE OPERATIONS LLC	
2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Suite 200	
	Maitland, FL_32751	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
11/17/2011	L11000131305	
3. Date of filing/registration in Florida 4	. Document number	
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:	
Registered Agent:	CT Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
(b) Enter name of <b>NEW Registered Agent</b> and/or <b>NEW</b>		
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address:	1201 Hays Street	
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cashereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company.  Matter	address of the registered office and the busines se of a Florida limited liability company, it is	S
Signature of a member or authorized representative of a member)		
Maureen Cathell, Authorized Person (Printed or typed name of signee)		
I hereby accept the appointment as registered agent and ag comply with the provisions of all statules relative to the proj am familiar with and accept the obligations of my position a F.S. Or, if this document is being filed to merely reflect a ch confirm that the limited liability company has been notified to	ree to act in this capacity. I further agree to her and complete performance of my duties, and s registered agent as provided for in Chapter 6 hange in the registered office address, I hereby in writing of this change.	d I 08,
By: Drose t-Kinty		
(Signature of Registered Agent) Corporation Service Company G	race E. Kirby, Asst. VP	

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