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COVER LETTER

Dear Sir or Madam: The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: **Atthe in Loganical** Name of Berson **Address** **Orlow Cle 14 32803 City/State and Zip Code **Mathrew Wishow Khan kww. com E-mail address: (to be yeld for future zimuar report notification) For further information concerning this matter, please call: **Mathrew Wishow Khan kww. com **E-mail address: (to be yeld for future zimuar report notification) **For further information concerning this matter, please call: **Mathrew Wishow Khan kww. com **E-mail address: (to be yeld for future zimuar report notification) **For further information concerning this matter, please call: **Mathrew Wishow Khan kww. com **E-mail address: (to be yeld for future zimuar report notification) **For further information concerning this matter, please call: **Mathrew Wishow Khan kww. com **E-mail address: (to be yeld for future zimuar report notification) **For further information concerning this matter, please call: **Mathrew Wishow Khan kww. com **E-mail address: (to be yeld for future zimuar report notification) **For further information concerning this matter, please call: **Mathrew Wishom Wishow Khan kww. com **Address** **Mathrew Wishow	TO: Registration Section Division of Corporations		
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Ahttra: Ladynacus Name of person Address Orlando H. 32803 City/State and Zip Code Mathrew W. Nishool Khan Raw. com E-mail address: (to be good for future format report notification) For further information concerning this matter, please call: Name of erson STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 266] Executive Center Circle Tallahassee, Florida 32301	SUBJECT: C. R. Pentals Name of Limit	S LLC	
Please return all correspondence concerning this matter to the following: Ahttra Ladywaca Name of Jerson Alshao Khan F2 Firm/Company Colar Cle F. Address Orlan Cle F. Orla	Dear Sir or Madam:		
Name of person Lishcol Khan F2 Firm/Company Olar Colarial Dr. Address Orlar Colarial Dr. Address City/State and Zip Code Mathrew W. Nishoo Khan law. Com E-mail address. (to be yeld for future remust report notification) For further information concerning this matter, please call: Mathrew W. Nishoo Khan law. Com E-mail address. (to be yeld for future remust report notification) For further information concerning this matter, please call: Mathrew W. Nishoo Khan law. Com E-mail address. (to be yeld for future remust report notification) For further information concerning this matter, please call: Mathrew W. Nishoo Khan law. Com Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314	The enclosed Registered Agent/Registered Office Chang	e and fee(s) are submitted for filing.	
Firm/Company GIT F. Calarial Dr. Address Orlande FL. 32803 City/State and Zip Code Mathrew & Nished Kran law. Com E-mail address: (to be used for future genual report notification) For further information concerning this matter, please call: Latt Ladyman at (407) 228 - 9711 Name offerson at (407) 228 - 9711 Name offerson Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building P.O. Box 6327 Tallahassee, Florida 32314	Please return all correspondence concerning this matter	to the following:	
Address Orlando FL 32803 City/State and Zip Code Matthew Wishoo Khan law. com E-mail address: (to be yeed for future genual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 266) Executive Center Circle Tallahassee, Florida 32301 Address City/State and Zip Code Mattheway. com Area Code & Daytime Telephone Number MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	Name of Derson	<u></u>	
City/State and Zip Code Mathew & Nishoo Khan law. Com E-mail address: (to be used for future zmuar report notification) For further information concerning this matter, please call: Matheway & Nishoo Khan law. Com E-mail address: (to be used for future zmuar report notification) For further information concerning this matter, please call: Matheway & July - 97/1 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Tallahassee, Florida 32314	Shool Khan P2 Firm/Company	·	
E-mail address: (to be good for future annual report notification) For further information concerning this matter, please call: Lal Laoyna at (HOY) 220 - 97 // Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314	COLOTIAL D. Address		
For further information concerning this matter, please call: Last Looyana at (407) 22 - 971 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Division of Corporations P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301	Orlande FL 32803 City/State and Zip Code		
For further information concerning this matter, please call: Last Looyana at (407) 22 - 971 Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations Division of Corporations P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301	Matthew @ Nishood Khan law. COM E-mail address: (to be good for future zymuai report notification)		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	u		
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	Name of Person at (10 ¹ 7) 228 - 9711 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:	Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
S \$25 Filing Fee			

INHS13 (2/14)

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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. Name of the limited liability company: C.B. Pentals 11C	-
2. (a) G900 Taul Stock Lokes Blue (b) Co900 Taul Stock Lokes B Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)	<u>'/</u> c
Suite 400 Soute 400 Orlando F1 32824 Orlando F1 32827	<u>-</u>
3/2//2012 3. Date of filing/registration in Florida 4. Document number 5. (a) Florida Pegistered Prent LLC Registered Agent and Registered Office shown on the recordy of the Florida Dept. of State: 3030 L. Pocky Point Dr. Scutte 150 A Registered Office Address ONUST BY FLORIDA STREET ADDRESS	-
Tampa , FL 39COT SEERE 17 0C1 21 All ASSET AND PL Enter name of NEW Registered Agent and/or NEW Registered Office address: OF F Colorial D. NEW Registered Office Address: ORIU	, en
Orlando FL 32803	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registere agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all stantage elative to the proper and complete performance of my duties, and I am jumiliar with and accept	
provisions of all statute relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter (I)5, F.S. Or, if this document is being filled to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agent	d