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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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PICK-UP WAIT MAIL				
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(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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JUL - 8 2013				
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07/05/13--01015--015 **25.00



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Becky Arnold

barnold0@cscinfo.com

Date: July 3, 2013

Order#: 707850/020

Re: IOTA MEADOWLARK, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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:Becky Arnold

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

2813 JUL -5 PM 1: 4-1



BXA VENDOR NO.: FL DATE: 07/03/13 CHECK NO.100931958

SECRETARY OF STATE OF FLORIDA

 DATE
 INVOICE NUMBER
 AMOUNT
 REFERENCE

 07/03/13
 7078501000001
 25.00
 RED FIFTH AVENUE HOLDINGS

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.

I. Nam	e of the limited liability company: lota Meadowlark	s, LLC	
2. (a) F	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	y: 4675 MacArthur Ct FL 15 Newport Beach, CA 92660	
	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4675 MacArthur Ct FL 15 Newport Beach, CA 92660	23
April 26,	· - · · · · · · · · · · · · · · · · · ·	L12000056510	Ha E
3. Date	of filing/registration in Florida	4. Document number	66 b F
5. (a) l	Registered Agent and Registered Office shown on	the records of the Florida D	ept of State
I	Registered Agent:	Dora F. Kaufman	
I	Registered Office Address:	Liebler, Gonzalez & Portuor 44 West Flagler Street, Suit Miami, FL 33130	
(b) E	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addre	<u>≈ss</u> :
1	NEW Registered Agent:	Corporation Service Compa	ny
	NEW Registered Office Address: MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
		Tallahassee	,FL <u>32301</u>
confirmed and the I liability the mem the operation	nited liability company is not organized under the led that after the change or changes are made, the F business office of the registered agent will be ident company, it is hereby confirmed that the change(s) abers of the limited liability company or as otherwiseing agreement of the limited liability company.	lorida street address of the r ical. Or, in the case of a Flo was/were authorized by an	egistered office orida limited affirmative vote of
R. Patter	rson Jackson, Authorized Representative	_	
I hereby compty v and I am Chapter address,	y accept the appointment as registered agent and a with the provisions of all statutes relative to the pro a familiar with and accept the obligations of my po 608, F.S. Or, if this document is being filed to me I hereby confirm that the limited liability company	gree to act in this capacity. Oper and complete performs sition as registered agent a rely reflect a change in the v has been notified in writin	I further agree to ince of my duties, s provided for in registered office g of this change.
By: Signature of	of Registered Agent Corporation Service Company		

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

INHS18 (05/08)

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.

-8-11, or com, in the braic by 1 to rad.	
1. Name of the limited liability company: lota Meadowlark	, LLC
 (a) Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>) 	Newport Beach, CA 92660
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4675 MacArthur Ct FL 15 Newport Beach, CA 92660
April 26, 2012	L12000056510
	4. Document number
5. (a) Registered Agent and Registered Office shown on t	
Registered Agent:	Dora F. Kaufman
Registered Office Address:	Liebler, Gonzalez & Portuondo, P.A. 44 West Flagler Street, Suite 2500 Miami, FL 33130
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
The same of the sa	Tallahassee ,FL 32301
of the limited liability company is not organized under the later that after the change or changes are made, the Floridand the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) he members of the limited liability company or as otherwish the operating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote of
R. Patterson Jackson, Authorized Representative	_
Printed or typed name of signee I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the provind I am familiar with and accept the obligations of my post chapter 608, F.S. Or, if this document is being filed to mendatess, I hereby confirm that the limited liability company By: Signature of Registered Agent Corporation Service Company	ree to act in this capacity. I further agree to per and complete performance of my duties, lition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
Signature of Registered Agent Corporation Service Company	

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