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## COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: Sunbelt Housin	ne of Limited Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Off	fice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning th	nis matter to the following:	
Dana Buâhana Name of Rerson		
Sunbelt Howsing Many Firm/Company	igement Ex	4 JUL 21
3129 Springbank Lo	ane	PM 7:06
Charlotle, NC 28226 City/State and Zip Code	<u></u>	91
dbushong (a) wf   and E-mail address! (to be used for future and	nual report notification)	
For further information concerning this matter	r, please call:	
Dana Bushona Name of Person	at (704) 295-4626 Area Code & Daytime Telephone Numbe	er
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	
Enclosed is a check for the following	g amount:	
\$25 Filing Fee	□ \$55 Filing Fee & Certified Copy	

INHS18 (2/14)

## 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: 5015	1+ Housing Management
2. (a) 5150 Tamiomi Trail North  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	
Suite 403	Suite 403
Naples, FL 34103	Naples, FL 34103
July 10, 2012  3. Date of filing/registration in Florida	L 1 2 CCOO 8956   Document number
	tem
Registered Office Address (MUST BE FLORIDA STRE	ETADDRESS -
Plantation, FL 333	52H
(b) William G. Allen	FL SIATE OFfice address:
Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u>	ered Office address:
5150 Tamiami Trail  NEW Registered Office Address:	`>
Surte 403	
Naples	FL 34103
the change or changes are made, the Florida street addres agent will be identical. Or, in the case of a Florida limite	e laws of the State of Florida, it is hereby confirmed that after s of the registered office and the business office of the registered d liability company, it is hereby confirmed that the change(s) ers of the limited liability company or as otherwise provided in the limited liability company.
Will stille	William G. Allon Printed or typed name of signee
Signature of a member or authorized representative of a member	
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and comp the obligations of my position as registered agent as provious merely reflect a change in the registered office address notified in writing of this change.	agree to act in this capacity. I further agree to comply with the lete performance of my duties, and I am familiar with and accept yided for in Chapter 605, F.S. Or, if this document is being filed s, I hereby confirm that the limited liability company has been
Signature of Registered Agent	