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TALLAHASSEE, FI ORIDA

COVER LETTER

	Registration Section Division of Corporations					
SUBJE	PANAMA CITY BEACH VENTURE	PANAMA CITY BEACH VENTURE II, LLC				
CCDCL	Name of Limited Liability Company					
Dear Sir	or Madam:					
The enc	losed Registered Agent/Registered Offic	ce Change and fee(s) are submitted for filing.				
Please r	eturn all correspondence concerning this	s matter to the following:				
ЛLL PR	LOBST					
	Name of Person					
NATIO	NAL SERVICE INFORMATION, INC					
	Firm/Company					
145 BA	KER ST					
	Address					
MARIO	ON, OHIO 43302	·				
	City/State and Zip Code					
_	NSII.NET					
E-	-mail address: (to be used for future annu	ual report notification)				
For furt	ther information concerning this matter,	please call:				
JILL PR	ROBST	740 387-6806 at ()				
	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	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
	Enclosed is a check for the following	amount:				
	□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				
INHS18	R (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. 2.	Na (a)	me of the limited liability company: 5391 LAKEWOOD RANCH BLVD SUITE 100 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		o)	Mailing address of limited liability company (Note: MAY BE POST OFFICE BOX)	<u></u>
		SARASOTA, FL 34240				
		08/30/2012	_	L120001119	945	
3.5.	(a)	Date of filing/registration in Florida GREENE, ROBERT FESQ	4.		Document number	
٠,		Registered Agent and Registered Office shown on the records of the Florida Dept. of State 601 12TH STREET WEST		a Dept. of State	ate:	
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>S)</u>	•	
		BRADENTON , FL	34205		•	
	(b)	NRAI Services, Inc.			TAg	ਲੀ
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office ac	<u>idress</u> :	AA'	FEB -5
		NEW Registered Office Address:			E. O.	E E
		1200 South Pine Island Road				ΐ
		Plantation , FL	33324		ATE RIDA	4 2
th ag w	e cha gent v as/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. On, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reg bility of f the lir	istered office company, it is nited liabilit	e and the business office of the regis s hereby confirmed that the change(y company or as otherwise provided	stered
_		6/ 20		_ Don l	M. Casto, III	
	_	ture of a member or authorized representative of a member		_	Printed or typeu name of signee	
ne	лијие	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had d in writing of this change. Services, Inc.				th the accept gfiled sen
B	у:	Services, Inc. June of Registered Agent June 1997		cretus		

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