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From:

Account Name : SHUTTS & BOWEN LLP (ORLANDO)

Account Number : 120030000004 Phone : (407)835-6959 Fax Number : (407)843-4076

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LLC REGISTERED AGENT CHANGE ROME LAND, LLC

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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 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.

l. Na	me of the limited liability company:ROME LAND.	LLC	
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	900) East Colonial Drive Por Son Orlando, FL 32817	
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	900) East Colonial Drive Orlando, FL 32817	
Oc	tober 4, 2012	L12000127291	
3. Dat	e of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
	Registered Agent:	Fowler White Boggs P.A.	
	Registered Office Address:	50 North Laura Street, Suite 2800 Jacksonville, FL 32202	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
	NEW Registered Agent:	Corporation Company of Orlando	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	300 South Orange Avenue <u>Suite 1000 (JGH)</u> <u>Orlando</u> , FL 32801	
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 registered 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 Edward M. Alden, Authorized Representative Printed or typed name of signee I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes 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 608, F.S. Or. if this document is being filed 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. CORPORATION COMPANY OF OBLANDO By: Y. Gregory Humphries Vice President Signature of Registered Agent			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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