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Florida Department of State
Division of Corporations
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LLC REGISTERED AGENT CHANGE
GIRAFFAS CYPRESS CREEK, 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 605.0111, 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: GIRAFFAS CYPRESS CREEK, LLC
2. (a) Principal office address of limited liability company: 1444 Biscayne Blvd Suite 216
(Note: MUST BE STREET ADDRESS) Miami, Florida 33132
- (b) Mailing address of limited liability company: 1444 Biscayne Blvd Suite 216
(Note: MAY BE POST OFFICE BOX) Miami, Florida 33132
- 12/11/2012 L12000154820
3. Date 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: ZAYAS MORILLAS LLC
Registered Office Address: 6305 BLUE LAGOON DRIVE SUITE 300
MIAMI, FL 33136
- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Agent: Business Filings Incorporated
NEW Registered Office Address: 515 E. Park Avenue
MUST BE FLORIDA STREET ADDRESS Tallahassee

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.

Paula Oliviera
Signature of a member or authorized representative of a member

Paula Oliviera

Printed or typed name of signer

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 605, 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.

Mark Williams
Signature of Registered Agent Mark Williams, AMP Business Filings Incorporated

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

FILING FEE: \$25.00

INSP525 (12/13)

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