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FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

4/20/17

NAME:

MUSGRAVE RESIDENTIAL LLC

TYPE OF FILING: CHANGE OF AGENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

TO:	Registration Section Division of Corporations							
SUBJE	Musgrave Residential, LLC							
	Name of Limited Liability Company							
Dear S	ir or Madam:							
The en	closed Registered Agent/Registered Off	ice Change and	fee(s) are submitted for filing.					
Please	return all correspondence concerning th	is matter to the	following:					
Dean	R. Westly							
	Name of Person							
Dean	R. Westly, a Professional Corpor	ration						
	Firm/Company							
307 C	Orchard City Drive #216							
	Address							
Camp	obell, CA 95008							
	City/State and Zip Code		-					
dean	@deanwestly.com							
E	-mail address: (to be used for future ann	ual report notif	fication)					
For fur	ther information concerning this matter,	, please call:						
Dean	R. Westly	408 at (441 7800 223					
	Name of Person		Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building		AILING ADDRESS: egistration Section vision of Corporations O. Box 6327					
	2661 Executive Center Circle Tallahassee, Florida 32301	Ta	Illahassee, Florida 32314					
	Enclosed is a check for the following	nclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ s	55 Filing Fee & Certified Copy					
INHSI	3 (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.	Nε	nme of the limited liability company: Musgrave Resi	dentia	I, LLC		
2	(a)	1600 W. Hillsdale Blvd. San Mateo, CA 94402	(b)	1600 W.	Hillsdale Blvd.	San Mateo, CA 94
	(")	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)	. (0)		Mailing address of limi (Note: MAY BE PO	nted liability company: OST OFFICE BOX)
3.		April 4, 2013 Date of filing/registration in Florida	. <u>1</u> 4.	_1000049	332 Document numbe	г
5.	(a)	Cal Title-Search, Inc.				
		Registered Agent and Registered Office shown on the records of the Florida Dept of State 1540 Glenway Drive Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				TALLAHA TALLAHA
		Tallahassee , FL	32301			20
	(b)	Corp2000				AM 9: 21
		Enter name of NEW Registered Agent and/or NEW Registered Office address.				2
		155 Office Plaza Drive				
		NEW Registered Office Address:				
		Tallahassee , FL 3:	2301			
the age wa the	cha ent v s/we gati	mited liability company is not organized under the laws inge or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of the eles of organization or the operating agreement of the limited and the street of the	e regist ility cor he limit nited li	ered office upany, it is led liability ability com	and the business of hereby confirmed company or as of pany.	office of the registered I that the change(s)
_A	Lienal	ure of a member or authorized representative of a member	Dea	n R. Wes	lly Printed or typed name	e of signee
		by accept the appointment as registered agent and agree ons of all gratules relative to the proper and complete pergations of my position as registered agent as provided for reflect a change in the registered office address. I held in friting of this change	to act i grforma for in Ci reby cot	n this capa nce of my d hapter 605. ifirm that t	• •	•
Sic	יעומוני	CAI Registered Agent				
	C	Division of Cornorations P.O. Bo	x 63274	Tallahoes	sec. FL 32314	