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## LLC REGISTERED AGENT CHANGE WINDOVER FLORIDA HOLDINGS, LLC

| Certificate of Status | 0       |
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EXAMINER

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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 605.0\;\text{14 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.

|                |  | (b)  | Mailing address of limited liability company.   |
|----------------|--|--|---|
|                | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   |  | (Note: MAY BE POST OFFICE BOX)  |
|                | 3525 BONITA BEACH RD #105  |  |   |
|                | BONITA SPRINGS, FL 34134   |  |   |
|                | 5/16/2013<br>Date of filing/registration in Florida  |  | 13000072531   |
|                | Date of filing/registration in Florida   | 4.   | Document number   |
| (a)            | R& A AGENTS, INC. Registered Agent and Registered Office shown on the records of the   | he Florida Der                                 | nt. of State.   |
|                | Registered Office Address OIUST BE FLORIDA STREET  |  | 2011  |
|                | C/O MARK J. PRICE 850 PARK SHORE DRIV  |  | A5511   |
| (b)            | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> C T Corporation System  | Office addres                                  | 2 AM IO: 34<br>SELFLORIA:   |
|                | NEW Registered Office Address:   |  |   |
|                | 1200 South Pine Island Road  |  |   |
|                | <u>Planiation</u> FL   | . 33324  |   |
| he ch<br>igent | limited liability company is not organized under the laviange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the | ability comp<br>of the limited<br>limited liab | pany, it is hereby confirmed that the change(s) dliability company or as otherwise provided in allity company.  |
|                | nature of a member in authorized representative of a member  |  | - his managing I firstly agree to comply with the   |
| -              | eby accept the appointment as registered agent and ag  | ree to act in<br>Operiorman                    | n this capacity. I further agree to comply with the<br>ee of my duties, and I am familiar with and acce<br>apter 605, F.S. Or, if this document is being file<br>firm that the limited liability company has been |

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