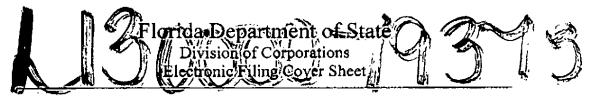
Division of Corporations

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sdiaz@harpermeyer.com

## LLC REGISTERED AGENT CHANGE SKY DEVELOPMENT LA GORCE, LLC

	•
Certificate of Status	0
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Estimated Charge	\$25.00

## 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. Na	ame of the limited liability company: Sky Develop	oment L	a	Gorce,	LLC		
2. (a)	407 Lincoln Road	ı	(b) 407 Lincoln Road				
2. (4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		( <b>-</b> )				d liability company: TOFFICE BOX)
	Suite 8M		_	Suite 8	М		
	Miami Beach, FL 33139	<del></del>	_	Miami I	Beach, FL 331	39	
	May 31, 2013		L	130000	79373		
3.	Date of filing/registration in Florida	— 4.	_		Document num	ber	
5. (a)	Gregory A. Sanoba						
J. (4)	Registered Agent and Registered Office shown on the records of	f the Plori	da D	ept. of Sta	te:		
	422 South Florida Avenue						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>(2)</u>		<del></del>		
					_		20
	Lakeland	L 3380	1		<del>-</del> .		
	, F.	L			<del>-</del>		표 그
(b)	Law Center of the Americas, LLC						5 FAR
(*)	Enter name of NEW Registered Agent and/or NEW Registere	d Office a	ddr	E84:	<del>-</del>		
	OOA Oosak Disassas Baskassad						
	201 South Biscayne Boulevard				_		3: 1,2
	NEW Registered Office Address:						2
	Suite 800	•			-		
	Miami , Fi	L_3313	1		_		
the cha agent v was/we the arti	imited liability company is not organized under the lainge or changes are made, the Florida street address o vill be identical. Or, in the case of a Florida limited I are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	f the reg iability of of the lis	iste com mite	red office pany, it ed liabili bility con	e and the busines is hereby confirm ty company or as mpany. ilippe Gine	ss off ned the other	Fice of the registered hat the change(s) erwise provided in
-	ure of a member or authorized representative of a member				Printed or typed n.		•
	by accept the appointment as registered agent and agens of all statutes relative to the proper and complete lgations of my position as registered agent as providily reflect a change in the registered office address, I important the property of this thange.					igree Jami i doc lity c	e to comply with the iliar with and accept cument is being filed company has been
	Division of Corporations P.O.	DUX OUA		* A11A11 <b>3</b>	B865, FL J4314		

FILING FEE: \$25.00