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Division of Corporations

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From:

Account Name : C I CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (954)208-0845 Fax Number : (614)573-3996

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LLC REGISTERED AGENT CHANGE IANE PROPERTIES II, LLC

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To:

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.

. <u>N</u> ai	me of the limited liability company: [IANE PROPERTI	ES II, LL	CS II, LLC		
. (a)	7349 MERCHANT COURT	7349 MERCHANT COURT			
, (a) .	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)	Mailing address of limited hability company: (Note: MAY BE POST OFFICE BOX)			
	LAKEWOOD RANCH, FL 34240	- -	LAKEWOOD RA	NCII. FL 34240	
	07/25/2013		L13000105580		
. (a)	Date of filing/registration in Florida CORPORATE CREATIONS NETWORK INC.	4.	Docun	nent number	
(2)	Registered Agent and Registered Office shown on the records of 801 US HIGHWAY I	the Florida	Dept of State		
	Registered Office Address (MUST BE FLORIDA STREET)	<u>ADDRESS</u>	1		
(b)	NORTH PALM BEACH	33408			
	C.T. Corporation System				
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	2023 ATR	
	NEW Registered Office Address:				
	1200 South Pine Island Road			Po 10	
	Plantation, FI	33324		5:07	
he cha igent v was/wi	imited liability company is not organized under the large or changes are made, the Florida street address or will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	the regi ability of the lin limited	stered office and to impany, it is herel iited liability comp	ne business office of the registered by confirmed that the change(s) pany or as otherwise provided in	
Ciana	nure of a member or authorized representative of a member		Printed or typed name of signee		
I here provis the ob- to mer potifie	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide left reflect a change in the registered office address, I d in writing of this change. C T Corporation System FEANL EMERICK ASSISTATI SECRETARY	ree to ac perforn ed for in hereby c	in this capacity, ance of my duties, Thapter 605, F.S. onfirm that the lin	I further agree to comply with the and I am familiar with and accep Or, if this document is being filed inted liability company has been	