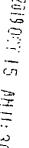


(Requestor's Name)						
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808.

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscqlobal.com

Date: October 14, 2019

Order#: 939652/038

Re: PREMIER ESTATES OF MUSCATINE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Anthony Arthur

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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.	Name of the limited liability company: PREMIER ESTATES OF MUSCATINE, LLC					
2.	(a)	5115 EAST STATE ROAD 64	_ (b)	5115 EAST STATE ROAD	64	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limite (Note: MAY BE POS		
		BRADENTON, FL 34208-5509		BRADENTON, FL 34208-550	09	
		07/25/2013		L13000105584		
3.		Date of filing/registration in Florida	4.	Document number		
ŝ.	(a)	Rotella, Bryan, Esq.				
		Registered Agent and Registered Office shown on the records of the	e Florida l	Dept. of State:		
		100 S Ashley St Suite 375			2019	
		TAMPA , FL_	33602		90771	
	(b)	Corporation Service Company			5	
'		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Office addi	ren:	= .0	
		1201 Hays Street			<u>အ</u> 0	
		NEW Registered Office Address:				
		Tallahassee F1.	32301			
the age was the	chai nt w s/we artic	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of these of organization or the operating agreement of the li	s of the S he regist pility con the limit	ered office and the business of apany, it is hereby confirmed t led liability company or as other	fice of the registered hat the change(s)	
Signature of a nyember or authorized representative of a member Jill Cilmi, Authorized Person Printed or typed name of signee						
Si	gnati	ure of a n)ember or authorized representative of a member	-	Printed or typed name of	of signee	
pro the to n	visia obli tere itiea	ny accept the appointment as registered agent and agree ons of all statues relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address, I he is in writing of this change. The of Registered Agent Corporation Scrvice Company	erformai for in Cl rreby coi	in this capacity. I further agree of my duties, and I am fam hapter 605, F.S. Or, if this document that the limited liability of the E. Kirby, Assistant Vice	iliar with and accept sument is being filed company has been	