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LLC REGISTERED AGEN^MCHANGE MID-STATE HOLDINGS ASSOCIATES, LLC

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

1. The name of the limited liability company is: Mid-S	tate Holdings Associates, LLC
2. (a) Principal office address of the limited liability comapny:	601 BAYSHORE BOULEVARD
(Note: MUST BE STREET ADDRESS)	SUTTE 850
mor Most by Street ADDRESS)	TAMPA FL 33606
(b) Mailing address of limited liability company:	601 BAYSHORE BOULEVARD
(Note: MAY BE POST OFFICE BOX)	_SUTTE 850
	TAMPA FL 33606
9/30/2013	L13000137353
3. Date of filing/registration in Florida	4. Document number
5.(a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:
Registered Agent:	CONNERY, JOHN C. JR.
Registered Office Address:	101 E. KENNEDY BOULEVARD
-	SUITP 3700
	TAMPA FL 33602
(b) Enter name of NEW Registered Agent and/or NEW I	Punistared Office address:
(b) Effect figure of Mexi Assistered Agent and/or Mexi 1	Sensitive Office Addresss
NEW Registered Agent:	Corporate Creations Network Inc.
NEW Registered Office Address:	11380 Prosperity Farms Road #221E
	11380 Fluspetty Pathis Road #221E
(MUST BE FLORIDA STREET ADDRESS)	Palm Bench Gardens FL 33410
or changes are made, the Florida street address of the registere identical. Or, in the case of a Florida limited liability company an affirmative vote of the members of the limited liability company the operating agreement of the limited liability company. (Signature of Finement of authorized representative of a member) Jon-Michael Sanchez, Attorney-in-Fact (Printed or Typed name of signee)	y, it is hereby confirmed that the change(s) was/were auditorized by pany or as otherwise provided in the articles of organization or
of all statutes relative to the proper and complete performance my position as registered agent as provided for in Chapter 60, in the registered office address, I hereby confirm that the limit Jon-Michael Sanchez (Signature of Registered Wesent)	e to act in this capacity. I further agree to comply with the provisions of my duties, and I am familiar with and accept the obligations of 5. F.S. Or, if this document is being filed to merely reflect a change ed liability configure has been notified in writing of this change. Special Secretary Box 6327, Tallahassee, FL 32314
11380 Prosperity Farms Road #221E	
Pelm Beach Gardens FL 33410	
(561) 694-8107	±\$