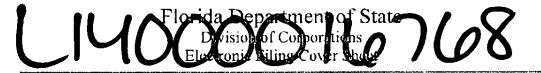
10/5/2016

Division of Corporations



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1/1

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.

(a)		(b)	***************************************	, agy manyanggas-risansephonic roog pagyroging asys Albands-hills, devolution-billochth-bil	ماستاستان استار به امدارسه	
	Principal office address of limited liability company; (Note: MUST BE STREET ADDRESS)		ŀ	wailing address of limited tiab 1 <u>Note: MAYBE POST O</u> E	ility con	ipany:
	225 NE MIZNER BLVD STE 200					
	BOCA RATON, FL 33432		BOCA RA	TON, FL 33432		
	1/30/2014]	.140000167			
	Date of filing/registration in Florida	4.		Document number		
(a)	CORPORATION COMPANY OF MIAMI					
(a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	Y		
	525 OKEECHOBEE BLVD. SUITE 1100 AJM					
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		•		
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	WEST PALM BEACH , F)				00	;;; ;; ,
	1.)	·			i	
(b)					Ġ	
(0)	Enter name of NEW Registered Agent and or NEW Registered	Office add	ress:	•		图:32
					$\ddot{\omega}$	25.55 25.55
	C T Corporation System				£3	
	NEW Registered Office Address:					
	1200 South Pinc Island Road					
	Plantation Pl	33324				
e cha gent w as/we e artic	united liability company is not organized under the large or changes are made, the Florida street address of all be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of the organization or the operating agreement of the	ws of the ! f the registability cor of the limited li	State of Flo ered office upany, it is ted liability ability corr	orida, it is hereby confinence and the business office shereby confirmed that the company or as otherwise.	of the the char	registered nge(s)
	Vode of Chron	Todd	J. Amara	ar talanda and an annual providing to the baseline approvate a common terminal and the	andre a service standard gar sign.	
	ure of a member or guttorized representative of a member			Printed or typed name of sig		1
neret ovisie e obli	by accept the appointment as registered agent and age ons of all statutes relative to the proper and complete igations of my position as registered agent as provide by reflect a change in the registered office address, I	ree to act e performa ed for in C hereby co	m this cape nce of my d hapter 605 nfirm that	acity. I further ugree to duties, and I am familian , F.S. Or, if this docume the limited liability com	comply with a m is be cany he	with the nd accept ging filed is been