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Office Use Only



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LLC PAChange 06-27-14



ON SERVICE COMPANY						
ACCOUNT NO. : 12000000195						
REFERENCE : 133042 5152748						
AUTHORIZATION CONTRACTOR						
COST LIMIT (\$ 25.0						
ORDER DATE: May 14, 2014						
ORDER TIME : 8:33 AM						
ORDER NO. : 133042-090						
CUSTOMER NO: 5152748						
CHANGE OF AGENT						
NAME DOGAD GEDAD LAVE LLG						
NAME: BOCAR CEDAR LAKE, LLC						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY						
XX PLAIN STAMPED COPY						
CONTACT PERSON: Emily Grav EXT# 62925						

EXAMINER:

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	me of the limited liability company: BOCAR CEDAR	LAKE, I	LLC		
2.	(a)	777 Arthur Godfrey Road	(b)	b) 777 Arthur Godfrey Road		
	• /	Principal office address of limited liability company:	- ` `	Mailing address of limited liability company:		
		(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)		
			_			
		Miami FL 33140		Minm: El 22440		
		IVIIAITII FL 33140	-	Miami, FL 33140		
7		02/10/2014 Date of filing/registration in Florida	_	L14000022044		
3.		Date of imagregistration in Fiorida	4.	Document number		
5.	(a)	ROBERT B BALOGH				
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		777 ARTHUR GODFREY ROAD		:		
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		MIAMI BEACH , FL	33140	<u> </u>		
		_		ي	77	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered C)(C d.)	ldress:		
		Enter name of NEW Registered Agent and/or NEW Registered C	mice aou	inress.	רָר	
		4204 Unite Street		, <u>Ed</u> C		
		1201 Hays Street NEW Registered Office Address:				
		registered office Address.		29		
		Tallahassee, FL_	32301	1		
If:	the ti	mited liability company is not organized under the laws	s of the !	State of Florida, it is hereby confirmed that after		
the	e cha	nge or changes are made, the Florida street address of t	he regist	istered office and the business office of the registe	ered	
ag	eni v	will be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of	bility cor	ompany, it is hereby confirmed that the change(s)) in	
the	arti	cles of organization or the operating agreement of the li	imited li	liability company.		
			LAU	URA ELLINGSWORTH		
_	Signal	ture of a member or authorized representative of a member	,	Printed or typed name of signee		
I	herel	by accept the appointment as registered agent and agre	e to act	t in this capacity. I further agree to comply with	the	
the	ovisi 2 obl	ons of all statutes retailve to the proper and complete p igations of my position as registered agent as provided	for in C	tance of my diffes, and I am familiar with and acc Chapter 605, F.S. Or, if this document is being fi	iled	
lo no	mere tified	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address. I ha d in writing of this change.	ereby co	confirm that the limited liability company has been	17	
	2	mily Gray	ť	Emily Gray		
Si	gnatu	re of Registere Agent Corporation Service Company	BY:	Emily Gray Asst VP		
		<u> </u>				

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00