

L14000081179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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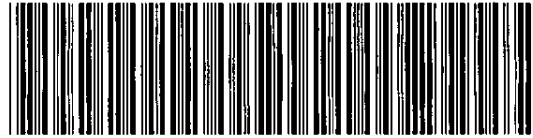
(Business Entity Name)

(Document Number)

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DC



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 256860 4303929

AUTHORIZATION :

COST LIMIT : \$ 25.00

[Handwritten signature]

ORDER DATE : August 14, 2014

ORDER TIME : 1:40 PM

ORDER NO. : 256860-010

CUSTOMER NO: 4303929

CHANGE OF AGENT

NAME: ARCPE 1, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams -- EXT# 62935

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. Name of the limited liability company: ARCPE 1, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

1900 Sunset Harbour Drive - 2nd Floor

Miami Beach, FL 33139

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

1900 Sunset Harbour Drive - 2nd Floor

Miami Beach, FL 33139

May 19, 2014

L14000081179

3. Date of filing/registration in Florida

4. Document number

5.(a) Greenberg Traurig, P.A.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

333 SE 2nd Avenue, 44th Floor

Miami, FL 33131

(b) Sue Olsen

Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Office Address:

1900 Sunset Harbour Drive, 2nd Floor

Miami, FL 33139

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Sue Olsen, Manager

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314

FILING FEE: \$25.00

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