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LLC REGISTERED AGENT CHANGE LAKEVIEW OPERATOR LLC

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1/11/2016 3:32:39 PM From: To: 8506176383(2/2)

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. N	ame of the limited liability company: LAKEVIEW OP	ERATOR LLC							
2. (a)	100 NORTH TAMPA STREET	(b) 10	(b) 100 NORTH TAMPA STREET						
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)							
	SUITE 3550	SUITE 3550							
	TAMPA, FL 33602	TAMPA, FL 33602							
	06/24/2014	L14	L14000103077						
3.	Date of filing/registration in Florida	4.	Document number						
5. (a)	CORPORATION SERVICE COMPANY								
J. (4)	Registered Agent and Registered Office shown on the records of	t. of State:							
	1201 HAYS STREET		20						
	Registered Office Address (MUST BE FLORIDA STREET	2016 JAN							
	TALLAHASSEE, FI								
(b)	NRAI Services, Inc.								
(-)	Enter name of NEW Registered Agent and/or NEW Registered								
	1200 South Pine Island Road								
	NEW Registered Office Address:								
	Plantation	33324							
the chagent	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited lighter authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registere iability compa of the limited limited in the limited in the limited liabi	any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company. Holden, Authorized Representative						
Sign	nture of a member or authorized representative of a member	<u></u>	Printed or typed name of signee						
	by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I affin writing of his change were affined by the control of the state	ree to act in to performance for in Chap hereby confi	this capacity. I further agree to comply with the e of my duties, and I am familiar with and accept of the 605, F.S. Or, if this document is being fited rm that the limited liability company has been						

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