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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : TRIPP SCOTT, P.A.

Account Number : 075350000065 Phone

: (954)525-7500 Fax Number : (954)761-8475

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## REGISTERED AGENT CHANGE RANDOLPH IX LLC

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

10/23/2014 14:36 FAX 9545252550

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

Persuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited Itability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	one of the limited liability company: RANDOLPH	IX LLC		
	(a)		: (b)		
	<b>\-</b> Y	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company:  Note: MAY BE POST OFFICE BOX	
		1250 UNIVERSITY DRIVE	12	50 UNIVERSITY DRIVE	
		MENLO PARK, CA 94025	MENLO PARK, CA 94025		
		08/18/2014	L14	000129343	
3,		Date of filing/registration in Florida	4.	Document number	
c	<b>(4)</b>	ART SHARIF			
٥.	(a)	Registered Agent and Registered Office shown on the records of	the Florida Dept	, of State:	
		Registered Office Address (MINST BE FLORIDA STREET)  1250 UNIVERSITY DRIVE	IDDRESS)	***	
		MENLO PARK ,FL	94025	· TA(c1	
	<b>(</b> b)	MATTHEW ZIFRONY, ESQ.		SECRE!	
	(-)	Briter frame of NEW Residered Agent and/or NEW Resistered	Office address	. 55 ∿	
		C/O TRIPP SCOTT, P.A.		ET A	
		NEW Registered Office Address:			
		110 SE 6TH STREET, 15TH FLOOR		JF STATE FLORID	
		FORT LAUDERDALE , FL	33301	DA .	
the age wa the	cha ent v e/we erti	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited like a authorized by an affirmative vote of the members of icles of organization or the operating agreement of the large of a member of the parties of a member of the appointment or registered agent and opings 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 agent as provide all in writing of this change.	the registered ability compared of the limited limited limited liability	d office and the business office of the registered my, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company.  HARIF, MANAGER  Printed or typed rams of signes	
Si	natu	ne of Registered Agent			