

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE ORLANDO CONVEYANCE, LLC

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JAN 29 2016

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

Pursuant to the provisions of sections 605.0114, 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: ORLA	ANDO CONVEYANCE, LLC		
2. (a) Principal office address of limited liability (Note: MUST BE STREET ADDRESS	y company: 6751 Forum Drive Suite	: 200	
(b) Mailing address of limited liability compa (Note: MAY BE POST OFFICE BOX)			
9/10/2014	L14000141587		
3. Date of filing/registration in Florida	4. Document number	า	
5. (a) Registered Agent and Registered Office	shown on the records of the Flo	orida Dept. of State:	
Registered Agent:	CT CORPORATION S	CT CORPORATION SYSTEMS	
Registered Office Address:		1200 SOUTH PINE ISLAND	
	PLANTATION, FL 33	PLANTATION, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address:	Business Filings Incom	Business Filings Incorporated 1200 South Pine Island Road	
 +	,		
(MUST BE FLORIDA STREET ADDRESS)	(E.S.S) Plantation	FL33324	
If the limited liability company is not organized confirmed that after the change or changes are mand the business office of the registered agent whisbility company, it is hereby confirmed that the the members of the limited hability company or the operating agreement of the limited liability company or	nade, the Florida street address of the identical. Or, in the case of change(s) was/were authorized	of the registered office of a Florida limited d by an affirmative vote of	
Signature of a member or authorized representative of a member			
Craig C. Mateer, Manager			
Printed or typed name of signee	,		
I hereby accept the appointment as registered a comply with the provisions of all statutes relative and I am familiar with and accept the obligation Chapter 60.5, F.S. Or, if this document is being address, I hereby confirm that the limited liability Mark Williams, AVP Business Filisignance of Registered Agent		JAN 2	
FILIN	G FEE: \$25.00	- P	
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