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Division of Corporations

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Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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LLC REGISTERED AGENT CHANGE CRUIKSHANK INVESTMENTS 3, LLC

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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 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.

2. (a)		(b)					
.,,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			~	mited liability com POST OFFICE B	• •	
	7901 4th St N STE 300		7901 4th St N STE 300				
	St. Petersburg FL 33702		St. Petersburg	FL 33702			
	09/19/14	L:	4000147247				
3.	Date of filing/registration in Florida	4.	Do	cument numb	ber		
5. (a	CRUIKSHANK, NORA						
	Registered Agent and Registered Office shown on the records of	ept, of State:					
	4946 SE 37TH Avenue	4946 SE 37TH Avenue					
	Registered Office Address IMUST BE FLORIDA STREET						
)251	77	
	OCALA			当岛	FILED		
	, .	TL 34480			73		
(b)	Registered Agents Inc			2	ا ۱ ا		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	<u>ess</u> :		±			
	7901 4th St N			2025 FER 13 PM 5: US	3		
	NEW Registered Office Address:						
	STE 300						
	St. Petersburg	33702					
	, ,	L					
f the	limited liability company is not organized under the la ange or changes are made, the Florida street address of	aws of the S	tate of Florida	a, it is hereby	confirmed that	t after	
agent	will be identical. Or, in the case of a Florida limited	liability com	pany, it is he	reby confirm	ed that the char	ige(s)	
vas/w he art	ere authorized by an affirmative vote of the members ticles of organization or the operating agreement of th	of the limite limited lia	ed hability co bility compar	mpany or as ay.	otherwise prov	ided in	
	Ature of a member or authorized representative of a member			Robin Jone	es		
Sign	ature of a member or authorized representative of a member		Pri	nted or typed na	ime of signee		
provis he ob o mei	thy accept the appointment as registered agent and agions of all statutes relative to the proper and complet ligations of my position as registered agent as provided by reflect a change in the registered office address, and in writing of this change.	gree to act in e performan led for in Ch I hereby con	this capacit ce of my duti apter 605, F. firm that the	y. I further a es, and I am S. Or, if this limited liabil	igree to comply familiar with a document is be ity company ha	with the nd accep ing filed s been	
	Daild Cherts David Roberts - Assistant S						