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*CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: February 1, 2016

Order#: 962286/007

Re: IOA PROPERTIES V, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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)	1855 W. State Road 434	(b)		
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Ma	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Longwood, FL 32750				
	04/15/2015		L15000066	066	
3.	Date of filing/registration in Florida	4.	Г	Ocument number	•
5. (a	John R. Wick				
). (u	Registered Agent and Registered Office shown on the records o	f the Florida	Dept. of State:		
	1855 W. State Road 434				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	2	•	
				2016	ander the s
	Longwood , F	L <u>32750</u>)		d de la companya de l
(b)	Corporation Service Company			ω γς Ας ω	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office ad	dress:	TN U	J
				STATE STATE STATE	
	1201 Hays Street			S S	
	NEW Registered Office Address:				
	Tallahassee , F	L 32301			
the ch agent was/v	limited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited la were authorized by an affirmative vote of the members ticles of organization or the aggrating agreement of the	of the registiability control of the limited length	stered office a ompany, it is lated liability liability comp	and the business offic nereby confirmed that company or as other	ce of the registered the the change(s)
Sign	ture of a member of athorized representative of a member		Printed or typed name of signee		
I here provis the ob to me notific	coy accept the appointment as registered agent and assions 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 le perform led for in (I hereby c	t in this capac ance of my di Chapter 605, onfirm that th	city. I further agree i utes, and I am famili F.S. Or, if this docu we limited liability con	to comply with the ar with and accep ment is being filed mpany has been

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00