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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

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LLC REGISTERED AGENT CHANGE FC ENCORE WINTER GARDEN, LLC

| Certificate of Status | 0       |
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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

| ١.      | No  | me of the limited liability company: FC Encore Winter   | Ciarden,                                     | 1.1.0  |   |
|---------|---|---|--|--|---|
| ר       | 2. (a) 3500 Lenox Road, NE                  |   | (b   | 3500 Lenc  | ox Road, NE   |
|         | 1417  | 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 510   |  | Suite 510  |   |
|         |   | Atlanta, GA 30326   | _  | Atlanta, G   | A 30326   |
|         |   | 09/03/2015  |  | L150001510   | 510   |
| 3.      |   | Date of filing/registration in Florida  | 4.   |  | Document number   |
|         | (م)   | Corporation Service Company   |  |  |   |
| ٥.      | (a)   | Registered Agent and Registered Office shown on the records of the  | he Florida                                   | Dept, of Stat  | -<br>e:   |
|         |   | 1201 Hays St  |  | 2020   |   |
|         |   | Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  |  | 2020 H.A.Y   |   |
|         |   |   |  |  |   |
|         |   | Tallahassee, FL   | 32301  |  |   |
|         |   |   |  |  | PH12: 01  |
|         | (b)   | C T Corporation System  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (  |  |  | - , 0   |
|         |   | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> (  | Office nd                                    | <u>dress</u> :   |   |
|         |   | 1200 South Pine Island Road   |  |  |   |
|         |   | NEW Registered Office Address:  |  | ·. <del>-</del>  | <del></del>   |
|         |   |   |  |  | _   |
|         |   | Plantation , FL   | 33324  |  | _   |
| tl<br>a | ic ch<br>gent<br>ac/u                       | limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liarere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the   | the reg<br>bility e<br>of the lir<br>limited | ompany, it<br>nited liabili<br>liability co              | is hereby confirmed that the change(s) ity company or as otherwise provided in mpany. |
| _       |   | s/ Patricia Belanger  | Pat<br>—                                     | ricia Belang   | Printed or typed name of signee   |
| ## ## P | her<br>rovi<br>he of<br>o me<br>otifi<br>y: | ature of a member or authorized representative of a member why accept the appointment as registered agent and agr<br>sions of all statutes relative to the proper and complete<br>oligations of my position as registered agent as provide<br>rely reflect a change in the registered office address, I have in writing of this change.  Is Michele Holden, Asst Sect | ree to ac<br>pertori<br>d for in<br>hereby c | et in this ca<br>nance of m<br>Chapter 60<br>confirm tha | nacing I forther ourses to comply with the  |
|         | - 2-1                                       |   |  |  |   |