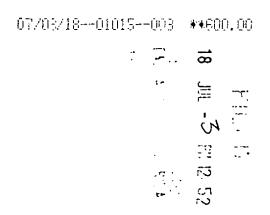
LIQUOUCOLOS

Office Use Only



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S. PRATHER

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	IECT: DFH Leyden 2, LLC					
	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Off	ice Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the following:				
R	obert Riva					
	Name of Person					
Dr	eam Finders Homes LLC					
	Firm/Company					
147	01 Philips Highway, Suite 300					
	Address					
Ja	cksonville, FL 32256					
	City/State and Zip Code					
F	Robert.Riva@DreamFindersHomes.co	m				
[E-mail address: (to be used for future ann	ual report notification)				
For fu	rther information concerning this matter.	please call:				
Ro	bert Riva	at (904)644-7670				
	Name of Person	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:						
	₩ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy				

1NHS18 (2/14)

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

Name of the limited liability company: DFH Leyden 2, LLC						
2	(a)	360 Corporate Way, Suite 100	_ (b)	360 Corporate Way, Suite 100		
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (*/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		Orange Park, FL 32073	<u> </u>	Orange Park, FL 32073		
		01/04/2016		L16000000659		
3.		Date of filing/registration in Florida	4.	Document number		
5.	(a)	Corporate Creations Network, Inc.				
	` ,	Registered Agent and Registered Office shown on the records of th	e Florida Der	ot, of State:		
		11380 Prosperity Farms Road #221E				
		Registered Office Address (MUST BE FLORIDA STREET AL				
				- -		
(1		Palm Beach Gardens . FL	33410			
	(b)	Robert Riva, General Counsel and Vice Presid	Robert Riva, General Counsel and Vice President			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	5.7			
		14701 Philips Highway, Suite 300				
		NEW Registered Office Address:				
			· -			
		Jacksonville , FL	32256			
the age wa the S	cha ent w s/we artic / ignat ignat oblic obligate	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of trill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of clos of organization or the operating agreement of the liability are affarmented at the proper and complete proper and complete proper and complete properties of my position as registered agent as provided the reflect a change in the registered office address, I have a provided the proper and complete properties of the properties address. I have the properties of the p	he registere bility complete limited limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company. 17		
Sig	natu	re of Regislered Algent				