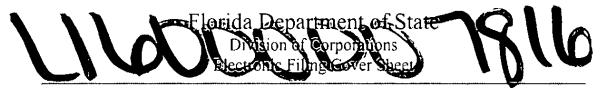
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Division of Corporations

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LLC REGISTERED AGENT CHANGE

CONDOMINIUM MANAGEMENT SERVICES, 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.

1. Na	ame of the limited liability company: Condominium M	anagement Se	rvices, LLC.			
2. (a)	235 E WARM SPRINGS RD	(b) _	O BOX 231300			
(4)	Principal office address of limited fiability company: (Note: MUST BE STREET ADDRESS) #107		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) LAS VEGAS, NV 89105			
	-107		AS ACCIVE' INA UATOS			
	LAS VEGAS, NV 89119					
	01/13/2016	L16	5000007816			
3.	Date of filing/registration in Florida	4.	Document number			
5. (a)	Northwest Registered Agent, LLC					
,. (u)	Registered Agent and Registered Office shown on the records of 7901 4th Street N	the Florida Dep	ot. of State:			
	Registered Office Address (MUST BE FLORIDA STREET. Suite 300	2025				
	St. Petersburg , FL	33702	2025 JAN 15			
(b)	C T Corporation System					
(1)	Enter name of NEW Registered Agent and/or NEW Registered	Office address				
	NEW Registered Office Address:	NEW Registered Office Address:				
	1200 South Pine Island Road					
	Plantation, FL	33324				
the cha agent v was/w	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	the registere ability comp of the limited liabi	ed office and the business office of the registered any, it is hereby confirmed that the change(s) I liability company or as otherwise provided in Ility company.			
C:	/s/CHRISTOPHER JONES, SECRETARY	CHRIST	OPHER JONES, SECRETARY Printed or typed name of signee			
l here	hy accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in a performance d for in Cha hereby confi	this capacity. I further agree to comply with the			