Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

Phone : (307)200-2803

Fax Number : (855)330-1010

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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## LLC REGISTERED AGENT CHANGE FEI FEI HOMES, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

## 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.

, , ,	ame of the limited liability company: Fei Fei H	omes, LLC	2				
					·- <del></del>		
2. (a) <sub>.</sub>	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b)					
	14667 Pine Glen Circle	P.O.Box 48304					
	Lutz, FL 33559	TAMPA, FL 33646					
	02/09/2016	L1600	0027342				
3.	Date of filing/registration in Florida	4.	Document nu	mber			
<b>.</b>	UNITED STATES CORPORATION AGENT	S, INC.					
5. (a)	Registered Agent and Registered Office shown on the records of		tate:				
	5575 S. SEMORAN BLVD			. 2			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	<u>—</u>	020 310			
	SUITE 36			2020 FEB 2 SECRETALL			
	ORLANDO FI	32822	_	2	ا معدد		
(b)	Registered Agents Inc.  Enter name of NEW Registered Agent and/or NEW Registered	l Office address:		PH 3: 18			
	7901 4th St N						
	NEW Registered Office Address:		<del></del>				
	STE 300						
	St. Petersburg, FI	33702					
the chagent	limited liability company is not organized under the la tange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	i the registered or liability company, of the limited liab	it is hereby confi ility company or	irmed that the ch	ange(s)		
Sign	nature of a member or authorized representative of a member	<u></u>	Printed or type	d name of signee			
I her provi the of to me notifi	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complet bligations of my position as registered agent as provid- rely reflect a change in the registered office address, l ed in writing of this change.	gree to act in this c e performance of r ed for in Chapter ( hereby confirm th nt Secretary	apacity. I furthe ny duties, and I o 605, F.S. Or, if t nat the limited lic	er agree to comp am familiar with this document is a ability company I	ly with the and accep being filed aas been		
	ture of Registered Agent	,					