160000085479

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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. N	ame of the limited liability company: TERRA CITY	CENTER	INVESTME	ENTS HOLDINGS III, LLC.	
2. (a)		(b)		
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) 3109 GRAND AVENUE #349		
	3310 MARY STREET, SUITE 302				
	COCONUT GROVE, FL 33133		COCON	COCONUT GROVE, FL 33133	
	05/04/2016		L1600008	85479	
3.	Date of filing/registration in Florida	 4.		Document number	
5. (a)					
J. (a)	Registered Agent and Registered Office shown on the records of	of the Florid	ia Dept. of Sta	ate:	
	NRAI SERVICES, INC.				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			202	
	1200 SOUTH PINE ISLAND ROAD				
	PLANTATION	33324		024 JUN 18 W1 9:5	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			- 9	
	Enter name of NEW Registered Agent and/or NEW Register	ed Office a	<u>ddress</u> :		
	Corporation Service Company				
	NEW Registered Office Address:			_	
	1201 Hays Street			_	
	Tallahassee , F	32301			
change agent was/w	limited liability company is not organized under the Le or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited there authorized by an affirmative vote of the members icles of organization or the operating agreement of the	ne registed liability c s of the lit	red office at ompany, it nited liabili	nd the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in	
	nture of a member or authorized representative of a member	JIL	L CILMI, A	UTHORIZED PERSON	
				Printed or typed name of signee	
provis the ob to mer notifie	rby accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provided verteet a change in the registered office address, and in writing of this change.	gree to ac e perforn led for in I hereby c	t in this cap vance of my Chapter 60 confirm that	pacity. I further agree to comply with the duties, and I am Jamiliar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
Signati	Mrs. C. Kuby ure of Registered Agent	GRACE	E. KIRBY.	, ASST. VICE PRESIDENT	