L9700000889

TRADITION GOLF CLUB 900 Royal Palm Beach Blvd Royal Palm FL 33411

City/State/Zip

Phone #

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

| 1. | 9000046718995 -11/08/0101023005 |
|---|--|
| (Corporation Name) | (Document #) |
| 2. (Corporation Name) | (Document #) |
| , • , | (Document #) |
| (Corporation Name) | (Document #) SECRET NOV |
| (Corporation Name) | (Dogument #) |
| ☐ Walk in ☐ Pick up time _ | Certified Copye |
| ☐ Mail out ☐ Will wait | Photocopy Certificate of Status |
| NEW FILINGS | <u>AMENDMENTS</u> |
| Profit Not for Profit Limited Liability Domestication Other | Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger |
| OTHER FILINGS | REGISTRATION/QUALIFICATION |
| Annual Report Fictitious Name | Foreign Limited Partnership Reinstatement Trademark Other |

CR2E031(7/97)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

| liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. |
|---|
| 1. The name of the limited liability company is: Iradifion 60 F Club LLC |
| 2. The mailing address of the limited liability company is: 900 Royal Palm Beach |
| Royal Palm Beach, FC 334141 |
| 08/05/1997 69700000889 |
| 3. Date of filing/registration in Florida 4. Document number |
| 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: |
| |
| ttamby Louis Name 321 Royal Poinciana Plaza |
| Paln Beach, FC 33480 City, State and Zip |
| |
| 6. The name and address of the new registered agent and/or office: |
| Danie Carr |
| 900 Royal Palm Beach Blod. |
| Florida street address (P.O. Box NOT acceptable) |
| Adyal Palm Beach 33411 City, State and Zip |
| City, State and Zip |
| If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered officers and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization of the operating agreement of the limited liability company. |
| (Signature of a member or authorized representative of a member) |
| (Printed or typed name of signes) |
| I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. |
| (Signature of Registered Agent) |
| Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 |

FILING FEE: \$25.00