Division of Corport 1000000014

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Florida Department of State

Division of Corporations
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Account Name : C T CORPORATION SYSTEM

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REGISTERED AGENT CHANGE

SMITH PROPERTY HOLDINGS SUNSET POINTE COURT L.L.C.

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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 608.416 or 608.508. 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.

agent, or both, in the Sia	ie uj i wrmaa.		•		
1. The name of the limit	ed liability compar	ny is: Smith Property Holdings Sunset	Pointe Court L.L.	<u>c</u>	 '
2. The mailing address of	of the limited liabil	ity company is : 9200 E Fanorana C	ircle, Englewood,	CO \$0112	
					_
1/14/2000		m0000000114			
3. Date of filing/registra	tion in Florida	4. Document n			
5. The name of the regist Florida Department of	ered agent and the State:	registered office address as shown	s on the records	of the	
-	Compartion Service	Сотряду			
		Name	_		
2,	1201 Hays Street		_ .		
		Address			
	Tallahasses, FL 323		_		
		City, State and Zip		₹.	. O
6. The name and address	of the new register	ed agent and/or office:		ALL A	O4 MAR
	C T Corporation Sys	tem		A.	70 A
		Name	-	. SS	ည်း ထိ
•	1200 South Pine Islan	nd Road	· ·	m c	<u>~</u> >>>=
	Florida street ad	dress (P.O. Box NOT acceptable)	-		
	Plantation	FL 33324		≅:	2 0
	Ci	ty, State and Zip		40 70	T 10
confirmed that after the cland the business office of liability company, it is he the members of the limite the operating agreement of the limit of	hange or changes a fithe registered ager reby confirmed that deliability company of the limited liability.	•	s of the registers c of a Florida lit ed by an affirm	ed office mited ative vote o	o f
Signature of a member or author	ized representative of a m	nember)			
Christen Vinnols, Vice Preside (Printed or typed name of signee)	ent .				
and I am familiar with an Chapter 608, F.S. Or, if the difference of the confirm CT Cappendian System	noment as registere is of all statutes rei d accept the obliga his document is be that the limited lia	ed agent and agree to act in this call agent and agree to act in this call act to the proper and complete pations of my position as registered ing filed to merely reflect a chang billty company has been notified in	apacity, I furth verformance of agent as provide in the registed in writing of thi	er agree to my duties, ded for in red office s change.	
Signature of Registered Agent)					
Divisio	n of Corporations	i, P.O. Box 6327, Tallahassee, Fl	L 32314		

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