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EXAMINER



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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED

DIVISION OF CORPORATIONS

11 DEC 21 PM 21 26



ACCOUNT NO. : I2000000195

REFERENCE : 032536 7860016

AUTHORIZATION

COST LIMIT (

ORDER DATE: December 20, 2011

ORDER TIME: 10:42 AM

ORDER NO. : 032536-153

CUSTOMER NO: 7860016

CHANGE OF AGENT

NAME: SANDLER AT ALTA LAGO, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY ___ PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

Pursuant to the provisions of sections 608.416 or 608.50 company submits the following statement in order to charin the State of Florida.	8, Florida Statutes, the undersigned limited liablisting its registered office or registered agent, or soft	
1. Name of the limited liability company: SANDLER A		
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	y: 1 AEC Parkway, Richmond Heights OH 44143	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1 AEC Parkway, Legal Dept. Richmond Heights, OH 44143	
03/01/2002	M02000000580	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	
Registered Agent:	C T Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW</u> Registered Agent:	W Registered Office address: Corporation Service Company	
NEW Registered Office Address:	1201 Hays Street	
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
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 office 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 or the operating agreement of the limited liability company. Matthe		
(Signature of a member or authorized representative of a member)	_	
Maureen Cathell, Authorized Person (Printed or typed name of signee)	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a c confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to sper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.	
By: (Signature of Registered Agent) Corporation Service Corupany	Sylvia Queppet, Asst. Vice President	

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00