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(Re	questor's Name)	· · · · · · · · · · · · · · · · · · ·	
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B. BOSTICK

JUL 2 3 2013

EXAMINER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: July 17, 2013

Order#: 714327-287

Re: SA-PG - ORLANDO LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Evelyn Wright

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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.

1. Name of the limited liability company: SA-PG - C	ORLANDO LLC		
2. (a) Principal office address of limited liability con (Note: MUST BE STREET ADDRESS)	ompany: 4 Red Oak Lane, Suite 201 White Plains, NY 10604	y: 4 Red Oak Lane, Suite 201 White Plains, NY 10604	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4 Red Oak Lane, Suite 201 White Plains, NY 10604		
06/18/2002	M02000001572		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State	e:	
Registered Agent:	Capitol Corporate Services, Inc.		
Registered Office Address:	155 Office Plaza Dr., Suite A Tallahassee, FL 32301	- "; ,	
(b) Enter name of NEW Registered Agent and/o	or NEW Registered Office address: 2	44 8 MA 440 MA 1	
NEW Registered Agent:	Corporation Service Company	***	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS	1201 Hays Street	\ 	
*************************************	Tallahassee ;,FL 323	01	
If the limited liability company is not organized unde confirmed that after the change or changes are made, and the business office of the registered agent will be liability company, it is hereby confirmed that the chathe members of the limited liability company or as of the operating agreement of the limited liability comp	the Florida street address of the registered of e identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative otherwise provided in the articles of organizati	ffice d	
Dona Priebe, Authorized Person Printed or typed name of signee I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to	 t and agree to act in this capacity. I further a the proper and complete performance of my c	gree to duties,	
I hereby accept the appointment as registered agent comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed address, I hereby confirm that the limited liability conforming Service Company By: Lague A Lague	it o merely reflect a change in the registered of smooth the second to the second this change in writing of this ch	office ange.	

Signature of Registered Agent Elizabeth A. Dawson, Asst. Vice President

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