

## Florida Department of State

Division of Corporations Public Access System

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## REGISTERED AGENT CHANGE

## FIRST MULTIFAMILY PROPERTIES LLC

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

liahilisa company	provisions of sections 608. submits the following state the State of Florida.	416 or 608.50 emens in orde	08, Florida Statutes, the rockange its registered	undersigned limited office or registered
1. The name of th	e limited liability company	is: First Multi	amily Properties LLC	
	dress of the limited liability			iswood, CO 80112
Z, , red singing				
	z*			<del></del> ,
10/16/2002 M02-000002		M0200000277	29	
	are of filing/registration in Florida 4. Document number		4. Document number	
5. The name of the Florida Departs	s registered agent and the renent of State:	gistered office	address as shown on the	records of the
	Corporation Service C	omosay		
		Name		₹., 0
	1201 Haye Stroot			AEG F
	Address			04 MAR SECRET TALL AH
	Tallabassee, FL 32301		<u></u>	MAR -8 CRETARY LAHASSI
	G	ty, State and 2	пÞ	TAK)
6. The name and a	ddress of the new registered	i agent and/or	office:	· Mag
C T Corporation System			F1.0 51	
	Name			TATE ORIO
1200 South Pine Island Road			en c	
	Florida street add	ress (P.O. Box	NOT acceptable)	
	z. Plantation	FL 33324		
		, State and Zin		
confirmed that after and the business of liability company, the members of the the operating agrees	ity company is not organized the change or changes are ffice of the registered agent it is hereby confirmed that it is hereby company coment of the limited liability.  **Company** Or authorized representative of a mental process.**	made, the Flowill be identicated the change(s) or as otherwise company.	rrida street address of the r cal. Or, in the case of a Flo was/were authorized by an	registered office orida limited affirmative vote of
Christen Vinnola, Vice (Printed or typed name of	s President f agnes)			
I hereby accept the comply with the product of I am familiar and I am familiar address, I hereby composition system.  Signature of Registers.		agent and agive to the proposts of my post g filed to mere	ree to act in this capacity. ser and complete performa tion as registered agent at tly reflect a change in the i has been notified in writin	I further agree to unce of my duties, sprovided for in registered office g of this change.
- 1	Division of Corporations,	P.O. Box 632'	7, Tallahassee, FL 32314	ŀ
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