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☐ WAIT	MAIL	
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Certificates	s of Status	
Special Instructions to Filing Officer:		
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JUN - 4 2013

T. HAMPTON

VIA US MAIL

Florida Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: RAINBOW STRATFORD, LLC

Dear Sir or Madam:

On behalf of the above-referenced corporation, enclosed please find the following for filing with the Florida Secretary of State:

- 1. One original (1) and one (1) copy of Change of Registered Agent/Address form;
- 2. \$35 \$25 LLC to cover the required filing fee.

Please file immediately the enclosed, and return a file-stamped copy to the undersigned.

If you have any questions regarding this filing, feel free to contact the undersigned directly at (888) 705-7274.

Respectfully,

Rachel Szitas
REGISTERED AGENT SOLUTIONS, INC.

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:	RAINBOW STRATFORD, LLC
2. (a) Principal office address of limited liability cor	mpany:
(Note: MUST BE STREET ADDRESS)	275 BATTERY STREET, SUITE 500 SAN FRANCISCO, CA 94111
(b) Mailing address of limited liability company:	
(Note: MAY BE POST OFFICE BOX)	275 BATTERY STREET, SUITE 500 SAN FRANCISCO, CA 94111
04/29/2003	M0300001346
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	vn on the records of the Florida Dept. of State:
Registered Agent:	NRAI SERVICES, INC.
Registered Office Address:	515 E. PARK AVE. TALLAHASSEE, FL 32301
(b) Enter name of NEW Registered Agent and/o	or NEW Registered Office address:
NEW Registered Agent:	Registered Agent Solutions, Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Dr. Suite A Tallahassee ,FL32301
If the limited liability company is not organized under 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 charcoman of the members of the limited liability company or as or the operating agreement of the limited liability considered agreement of the limited liability considered agent of the limited of a member. Printed or typed name of signee 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 considered agent of Registered Agent.	er the laws of the State of Florida, it is hereby the Florida street address of the registered office e identical. Or, in the case of a Florida limited ange(s) was/were authorized by an affirmative vote otherwise provided in the articles of organization mpany.

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