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S. WARREN AUG 1 7 2017

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJI	CURLY ROAD ASSOCIATES,	LLC				
301531	Name of Limited Liability Company					
Dear S	Sir or Madam:					
The en	nclosed Registered Agent/Registered Office C	Change and fe	e(s) are submitted for filing.			
Please	return all correspondence concerning this m	atter to the fol	lowing:			
Mich	ael Mirrione					
	Name of Person					
Wolz	Corporate USA					
-	Firm/Company					
36 S	. 18th Ave, Suite D					
	Address					
Brigh	nton, CO 80601		_			
	City/State and Zip Code					
Cor	notionee @ gould rather E-mail address: (to be used for future annual	report notific	ation)			
For fu	urther information concerning this matter, ple	ase call:				
Mich	nael Mirrione	303	665.9659			
	Name of Person		Area Code & Daytime Telephone Number			
	STREET/COURIER ADDRESS:	MA!	LING ADDRESS:			
	Registration Section	Regi	stration Section			
	Division of Corporations Division of Corporations		sion of Corporations			
	Clifton Building		Box 6327			
	2661 Executive Center Circle Tallahassee, Florida 32301	Talla	ahassee, Florida 32314			
	Enclosed is a check for the following amount:					
	☑ \$25 Filing Fee	☐ \$ 55	Filing Fee & Certified Copy			
INHS	S18 (2/14)					

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: CURLY RO	AD ASS	0	CIATES, I	LLC	 —
2	(a)	2940 SPORTS CORE CIRCLE		(b) 2940 SPORTS CORE CIRCLE			RCLE
۷.	(a) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(,		ailing address of limited (Note: MAY BE POS)	
		WESLEY CHAPEL, FL 33544		-	WESLEY	CHAPEL, FL 3	3544
		08/03/2004		_	M040000	03077	
3.		Date of filing/registration in Florida	4.		I	Document number	
5	(a)	NRAI SERVICES, INC	_				
υ,	(-)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State: 1200 South Pine Island Road					
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-		
		Plantation	_L 33324				FILED FILED FILED FILED
			<u></u>				FILED 16.15 A
	(b)	Universal Registered Agents, Inc.					F 3 6
		Enter name of NEW Registered Agent and/or NEW Register	ed Office ac	id.	<u>ress</u> :		54 =
		3458 Lakeshore Drive					
		NEW Registered Office Address:	<u> </u>				<i></i>
		Tallahassee	FL_3231	2			
th ag with	e cha gent vas/w as/w e art Signi Nere rovis	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the following of a member or authorized peresentative of a member obly accept the appointment as registered agent and clions of all statutes relative to the proper and completing of the proper and completely reflect a change in the registered agent as proving the proper of this change.	laws of the of the reg liability of the limited	e listomination	State of Flo tered office mpany, it is ited liability iability com e A. Graci	and the business of hereby confirmed or company or as other apany. Z Printed or typed name	of signee
S	ignat	ure of Registered Agent Michael Mirrione, Assistant VP					