Division of Corporations Electronic Filing Cover Sheet

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H150001471023ABCV

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To:

Division of Corporations

Fax Number : (850)617-6383

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Email | Address: | | |
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LLC REGISTERED AGENT CHANGE LAD I REAL ESTATE COMPANY, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$25.00 |

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. N | ame of the limited liability company: LADIT | EAL ESTA | TE CO | MPANY | , LLC | | |
|-----------------------------|---|--------------------------------|------------------|----------------------|---|---------------------------------------|--|
| 2. (a) | 200 International Circle #3500, Hunt Valley, MD | 21030 | (b) | 200 Int | ernational Circle #3500, Hunt | Valley, MD 21030 | |
| ,,,, | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | |
| | | | | | | | |
| | 9/29/2004 | | 1 | M040000 | 004071 | | |
| 3. | Date of filing/registration in Florida | | 4. | | Document number | | |
| 5. (a) | CORPORATION SERVICE COMPANY | | | | | | |
| •• (••) | Registered Agent and Registered Office shown on the | records of the | Florida | Dept. of S | State: | | |
| | 1201 HAYS STREET | | | | | | |
| | +7: | | | | | | |
| | | | | | | | |
| | | | | | | 70 2 | |
| | TALLAHASSEE | , FL_32 | 2301-25 | 525 | | | |
| (b) | C T Corporation System | | | | | | |
| | Enter name of NEW Registered Agent and/or NEW I | Registered Of | lice add | ress: | _ | <u> </u> | |
| | | | | | | ##################################### | |
| | - | | | | <u> </u> | F-11 U. | |
| | NEW Registered Office Address: | | | | | | |
| | 1200 South Pine Island Road | | | | | 07 | |
| | Plantation | , FL_ ³³ | 324 | | | | |
| | | | | ~ | | | |
| the ch | limited liability company is not organized und- ange or changes are made, the Florida street ac will be identical. Or, in the case of a Florida I. | ddress of the | e regist | tered of | fice and the business office | of the registered | |
| was/w | ere authorized by an affirmative vote of the miticles of organization or the operating agreeme | embers of the | he limi | mpany, ted liab: | ility company or as otherwi | se provided in | |
| the ar | ticles of organization or the operating agreeme | nt of the lin | nited li | ability c | company. | · | |
| F: | 4/5- | | Jenni | fer Kurz | | | |
| I hora | nature of a member or authorized representative of a member by acception appointment as registered agent ions of all statutes relative to the proper and continuous | t and aaree | to act rforma | in this c | Printed or typed name of sig apacity. I further agree to ny duties, and I am familiar | comply with the | |
| ine ou Io mer notifie | ions of all statules relative to the proper and c ligations of my position as registered agent as rely reflect a change in the registered office ad a in writing of this change. | i provided ja ldress, I her | eby co | napter t nfirm th | ous, r.s. Or, if this accume at the limited liability comp | oany has been | |
| By: | La manyour | | | | | | |
| Signati | ure of Régistered Agent | | | | | | |
| Samai | ntha Jones, Assistant Secretary, C T Corporation Sy Division of Corporations | /stem • P.O. Box | 6327 | • Tallal | hassee. FL 32314 | | |
| | | LING FEE | | | | | |

INHS18 (2/14)