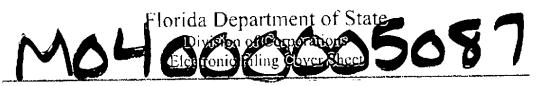
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Division of Corporations



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## LLC REGISTERED AGENT CHANGE CLP BENEFICIARY WHISTLER, LLC

Certificate of Status	U
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Estimated Charge	\$55.00

C. BRUMBLEY

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## 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.

Na	me of the limited liability company: CLP BENEFICE	ARY WHISTL	ER, LLC	
	No change	(b) No.	(b) No change	
· · · /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)	
	11/19/2004		4000005087	
	Date of filing/registration in Florida	4.	Document number	
(a)	RYAN FURMAN		00.	
	Registered Agent and Registered Office shown on the records of	the Flonda Dej	n. of State	
	450 S. ORANGE AVENUE			
	Registered Office Address <u>(MUST BE FLORIDA STREE,T</u>	<u>миникээр</u>		
	ORLANDO, FI	32801	2022 3500 7AL	
(b)	C T Corporation System		2022 AUG 29 SECALLAHASS	
(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office addres	UG 29 AM AMASSEE	
	NEW Registered Office Address:	_ <del></del> ,	PERSTATE	
	1200 South Pine Island Road		E	
			<del></del>	
	Plantation	33324		
cha nt v s/w art	imited liability company is not organized under the la inge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the register iability comp of the limited liab	ed office and the business office of the registe pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in	
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee	
ovis 2 obi mer tifie : M	hy accept the appointment as registered agent and agions of all statutes relative to the proper and completing tions of my position as registered agent as providely reflect a change in the registered office address, I d'm writing of this change.  C. T. Corporation System  lichele Holden, Asst Sect  United Registered Agent	gree to act in e performand led for in Che hereby confi	this capacity. I further agree to comply with ace of my duties, and I am familiar with and accupier 605, F.S. Or, if this document is being firm that the limited liability company has been	