## M05000005528

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N. Cuffigan AUG 2 5 2011



ORPORATION SERVICE COMPANY

ACCOUNT NO. : 12000000195

REFERENCE

AUTHORIZATION C

COST LIMIT :

ORDER DATE: August 2, 2011

ORDER TIME: 11:23 AM

ORDER NO. : 865339-231

CUSTOMER NO: 7830453

## CHANGE OF AGENT

NAME: CASCADE MOBLEY PARK LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

## 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: CASCADE MO	OBLEY PARK LLC	
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2801 Alaskan Way Suite 200	
10/03/2005	RDATE ROATE	
	M05000005528  4. Document number	
3. Date of filing/registration in Florida	1. Document number	
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
Registered Agent:	NRAI Services, inc.	
Registered Office Address:	515 E. Park Avenue Tallahassee, FL 32301	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :  NEW Registered Agent: Corporation Service Company		
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	Tallahassee ,FL 32301	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.  Watter		
Signature of a member or authorized representative of a member)	•	
Maureen Cathell, Authorized Person (Printed or typed name of signee)		
I hereby accept the appointment as registered agent and as comply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position. F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified	ree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change.	
Sy: Sy (Signature of Registered Agent) Corporation Service Company	Grace E. Kirby, Assistant VP	

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