

Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE SUWANEE, LLC

| Certificate of Status | 0 |
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Corporate Filing Menu

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K. SALY EXAMINER JUN 17 2015

6/16/2015

- 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. | Ne | me of the limited liability company: SUWANEE, LLC | | | | | . — — | | |
|----------------|--------------------------------|--|-------------------------------|---|--|---|---|--|------------------|
| 2. | (a) | 200 International Circle #3500, Hunt Valley, MD 21030 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | _ (| b) <u>200</u> | | tional Circle #3500, I failing address of limite (Nate: MAY BE POS | d liability c | ompany: | |
| 3. | | 8/14/2006 Date of filing/registration in Florida | - - 4. | M060 | 0000045 | .53 Document number | | | |
| 5. | 5. (a) | | . r | h. D1 | | | | | |
| | | Registered Agent and Registered Office shown on the records of a 1201 HAYS STREET | | | _ | | | | |
| | | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | | | 2015 JUN | eas 3* |
| | | TALLAHASSEE ,FL | 32301 | 2525 | | | 55.3 | 5 | - |
| | (b) | C T Corporation System | | | | | مرواني مرواني مرواني | Property of the control of the contr | \$***** ***** |
| | | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> | OHICO N | <u>ogress</u> : | | . . | | 9:58 | |
| | | NEW Registered Office Address: | | | | | | | |
| | | 1200 South Pine Island Road | | | | | | | |
| | | Plantation , FL | 33324 | | | | | | |
| th ag th | e chi gent as/w e art | similed liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the nature of a member of a description of authorized representative of a member oby acceptable appointment as registered agent and agricions of any position as registered agent as provided by reflect a change in the registered office address, I is a difficultion of this change. | the regability of the limited | isterec compa mited i liabili mifer K | d office ny, it is liability ity com | and the business o hereby confirmed company or as oth pany. Printed or typed name | ffice of the that the concerning property of signee | ne regist hange(s rovided | iered in |
| 8 | y: | ely reflect a change in the registered office address, [] d in writing of this change. June of Registered Agent | hereby | confir | m that i | he limited liability | company | has bee | en |
| | | ntha Jones, Assistant Secretary, C T Corporation System | | | •• • | Pag | | | |
| | | Division of Corporations P.O. E FILING P | | | allahas *********************************** | sce, FL 32314 | | | |

INHS18 (2/14)