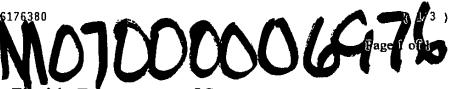
7/7/2024 16:29:55 From: To: 8506176380

Division of Corporations



Torida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000162156 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

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

Email Address:

## LLC REGISTERED AGENT CHANGE RICHLAND TOWERS - MIAMI, LLC

	<u></u>
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

JUL 08 2014

C. CARRO7/7/2014

	COVER LETTER				
TO: Registration Section Division of Corporations					
Richland Towers - Miami, LLC SUBJECT:					
Name of Limited Liability Company					
Dear Sir or Madam:					
The enclosed Registered Agent/Registered Office	ice Change and fee(s) are submitted for filing.				
Please return all correspondence concerning the	is matter to the following:				
Barbara Paiva					
Name of Person					
American Tower Corporation					
Firm/Company					
111 Huntington Avenue					
Address	<del></del>				
Boston, MA 02116					
City/State and Zip Code					
	·				
E-mail address: (to be used for future annual	ual report notification)				
For further information concerning this matter,	please call:				
Barbara Paiva	617 375-7500 at (				
Name of Person	Area Code & Daytime Telephone Number				
STREET/COURIER ADDRESS:	MAILING ADDRESS:				
Registration Section	Registration Section				
Division of Corporations	Division of Corporations				
Clifton Building	P.O. Box 6327				
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314				
Enclosed is a check for the following amount:					
□ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				
INHS18 (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. 1	Name of the limited liability company: Richland To	owers - Miami, LLC		
2. (a	Principal office address of limited liability compar (Note: MUST BE STREET ADDRESS)  400 N ASHLEY DR STB 3010		Mailing address of limited Habi (Note: MAY BE POST OF) N ASHLEY DR STE 3010	
	TAMPA, FL 33602	TA	MPA, FL 33602	
	11/29/2007	M07	000006976	
3.	Date of filing/registration in Florida	4.	Document number	
5. (	Dawn Lemons			
	Registered Agent and Registered Office shown on the reconnected Office Address   (MUST BE FLORIDA STR 400 N ASHLEY DR STE 3010		. 01 State.	
	ТАМРА	, FL 33602	·	
(b	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regi</u>	istered Office address:		
	1200 South Pine Island Road			· 🚡 🕌
	Plantation	, FL <sup>33324</sup>	୍ର ଆ	\$ <b>\$</b>
the clagent was/vihe ar	e limited liability company is not organized under thange or changes are made, the Florida street address were authorized by an affirmative vote of the membricles of organization and the operating agreement of the member of a member o	ess of the registered ited liability compa bers of the limited of the limited liabili Olga Hinl	d office and the business office my, it is hereby confirmed that the liability company or as otherwisity company.  kel, Authorized Person  Printed or typed name of sign	of the registered he change(s) se provided in
	reby accept the appointment as registered agent an isions of all statutes relative to the proper and combilgations of my position as registered agent as prively reflect a change in the registered office addressed in writing of this change ammy I office corposation system.  Corposation System  Wice President	in agree to de control policie performance ovided for in Chapt the Confirm ent	of my duties, and I am lamiliar ter 605, F.S. Or, if this docume m that the limited liability comp	with and accept nt is being filed any has been