## M0800000152

(Req	uestor's Name)			
(Address)				
(Address)				
(City	/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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FIT : Office Use Only



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JIVISION OF CORPORATIONS

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CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: November 12, 2014

Order#: 366095-015

Re: BROADSTONE APLB SARASOTA, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Morgan Kennedy

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## 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.	Na	me of the limited liability company: BROADSTOR	NE APLB SAR	ASOTA, LLC
2.	(a)	530 CLINTON SQUARE	(b)	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(-)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		ROCHESTER N\ 14604		
		01/09/2008	M	10800000152
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	INCORPORATING SERVICES, LTD.		
٠.	(a)	Registered Agent and Registered Office shown on the records	of the Florida De	pt. of State:
		1540 GŁENWAY DRIVE		
		Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
		TALLAHASSEE ,	FL <u>32301</u>	SECHETA SECHETA OF A
	(b)	Corporation Service Company	. 100011	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office addres	
		1201 Hays Street		STATE RATION 1: 34
		NEW Registered Office Address:		:34
		Tallahassee ,	FL 32301	
the ag wa the	e cha ent v as/we e arti	imited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member icles of organization or the operating agreement of the street and the companies of the companies of the operating agreement of the companies of the c	laws of the Sta of the register I liability comp is of the limite he limited liab	red office and the business office of the registered bany, 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	<del></del>	Printed or typed name of signee
the to	ovisi e obl merc	by accept the appointment as registered agent and c ions of all statutes relative to the proper and comple ligations of my position as registered agent as provi ely reflect a change in the registered office address, d in writing of this change.	agree to act in the performand ded for in Cha I hereby conf	this capacity. I further agree to comply with the re of my duties, and I am familiar with and accep pter 605, F.S. Or, if this document is being filed irm that the limited liability company has been

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

BY: Grace E. Kirby, Asst. Vice President

Signature of Registered Agent Corporation Service Company