

10900000345

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CLAS Information Services  
2020 Hurley Way, Suite #350 Sacramento CA 95825  
Tel: (800) 447-6237

Job Number: 321843-6671

Date: 12/19/17

**Name: SCP 2011-C38-502 LLC**

Request For: Florida

TYPE OF FILING: Change of Agent

Special Instructions:

Please file the attached upon receipt. We have enclosed check #60412 in the amount of \$25.00. Please call with any questions. Thank you in advance for your assistance.

Sincerely,

Judy Culver

Florida Department of State  
Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**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. Name of the limited liability company: SCP 2011-C38-502 LLC
2. (a) C/O LAW OFFICES OF CHRISTOPHER R. DEAGAZIO, P.C.  
Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)  
8 CEDAR STREET, SUITE 45  
WOBURN, MA 01801
- (b) C/O LAW OFFICES OF CHRISTOPHER R. DEAGAZIO, P.C.  
Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)  
8 CEDAR STREET, SUITE 45  
WOBURN, MA 01801
3. 1/26/2009 Date of filing/registration in Florida
4. M09000000345 Document number
5. (a) CORPORATION SERVICE COMPANY  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
1201 HAYS STREET  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
TALLAHASSEE, FL 32301-2525
- (b) JOHN K.C. HYSLIP  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
722 REEF POINT CIRCLE  
NEW Registered Office Address:  
NAPLES, FL 34108

17 DEC 26 AM 7:42  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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.

\_\_\_\_\_  
Signature of a member or authorized representative of a member

JOHN K.C. HYSLIP, MANAGER  
Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
Signature of Registered Agent JOHN K.C. HYSLIP, MANAGER

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