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PICK-UP	☐ WAIT	MAIL	
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Certified Copies	_ Certificate	s of Status	
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SECRETARY OF STATE TALLAHASSEE, FLORIGA

JUL 1 9 2013

To:

CORPORATION SERVICE COMPANY

REGISTRATION SECTION DIVISION OF CORPORATIONS

From:

Evelyn Wright

Date:

July 16, 2013

Order#:

717956-048

Re:

HOVSITE FIRENZE LLC

Enclosed please find:

Change of Registered Agent and Office.

Check in the amount of \$25.00.

Please take the following action:

File in your office on a routine basis.

Issue Proof of Filing.

Please return evidence to the following:

Attn: Evelyn Wright

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.

OUCA.XCOA

· 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: HOVSITE FIR	ENZE LLC	
	office address of limited liability compa MUST BE STREET ADDRESS)	ny: 3601 Quantum Boulevard Boynton Beach FL 33426	
	address of limited liability company: MAY BE POST OFFICE BOX	3601 Quantum Boulevard Boynton Beach FL 33426	
10/01/2009		M09000003895	SEC
	g/registration in Florida	4. Document number	7-T
5. (a) Register	ed Agent and Registered Office shown o	n the records of the Florida	ASA -8 Dept of State:
., .	ed Agent:	NRAI Services, Inc	OF S
Register	ed Office Address:	1200 South Pine Island Ro	
(b) Enter na	me of <u>NEW Registered Agent</u> and/or <u>N</u>	EW Registered Office add	ress:
<u>new</u> r	egistered Agent:	Corporation Service Company	
	egistered Office Address:	1201 Hays Street	
(MUST	BE FLORIDA STREET ADDRESS)	Tallahassee	,FL 32301
confirmed that a and the business liability compar the members of the operating ag	ability company is not organized under the after the change or changes are made, the soffice of the registered agent will be identified it is hereby confirmed that the change the limited liability company or as other preement of the limited liability company or an authorized representative of a member	Florida street address of the entical. Or, in the case of a I (s) was/were authorized by a wise provided in the articles	registered office Florida limited an affirmative vote of
Dona Priebe, Au Printed or typed nan			
I hereby accept comply with the and I am familia Chapter 608, F. address, I hereb	the appointment as registered agent and provisions of all statutes relative to the arm with and accept the obligations of my S. Or, if this document is being filed to invector that the limited liability compositions	l agree to act in this capacit proper and complete perfori position as registered agent nerely reflect a change in th any has been notified in writ	y. I further agree to nance of my duties, as provided for in he registered office ing of this change.

Signature of Registered Agent Corporation Service Company April Hudson, Asst VP

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