M 10000001498

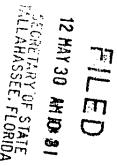
(1	Requestor's Name)				
(,	Address)				
(,	Address)	<u> </u>			
	City/State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·			
PICK-UP	☐ WAIT	MAIL			
(1	Business Entity Name)	·····			
(Document Number)					
Certified Copies	Certificates of	Status			
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D. BRUCE

MAY **31** 2012

EXAMINER



CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE : 221861 7490443

AUTHORIZATION :

COST LIMIT

ORDER DATE: May 30, 2012

ORDER TIME : 3:06 PM

ORDER NO. : 221861-020

CUSTOMER NO: 7490443

CHANGE OF AGENT

NAME: LCP SLJV 2010-1 FL-3, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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. Na	me of the limited liability company: <u>LCP</u>	SLJV 2010	-1 FL-3, L.L.C.		
2. (a) Principal office address of limited line (Note: MUST BE STREET ADDI		y company:	399 Park Ave., 18th Floo	r	
		-	New York, NY 10022		
	Mailing address of limited liability compa		399 Park Ave., 18th Floo	<u> </u>	
(Alter Hera Mar 1004 Or 1101)		-	New York, NY 10022		
Marc	eh 30, 2010	_	M10000001498		
3. Da	te of filing/registration in Florida	4.	Document number		
5. (a) Registered Agent and Registered Office s	shown on th	e records of the Florida De	ept. of State:	12
Registered Agent:		_	CT Corporation System	72.7	
Registered Office Address:	Registered Office Address:	-	1200 South Pine Island Ro	nad HASS	MAY 30
		-	Plantation, FL 33324		<u>*</u>
(b)	Enter name of NEW Registered Agent a	nd/or <u>NEW</u>	Registered Office addres	FLOR STA	<u>a</u>
	NEW Registered Agent:	4	Corporation Service Comp	any om	
NEW Registered Office Address: (MUST BE FLORIDA STREET AD.			1201 Hays Street		
		ESS)	l'allahassee	,FL_32301	
that a office herebiliabili	limited liability company is not organized for the change or changes are made, the Floof the registered agent will be identical. On y confirmed that the change(s) was/were auty company or as otherwise provided in the diability company.	orida street a or, in the cas otherized by	address of the registered of e of a Florida limited liabi an affirmative vote of the	ffice and the busine lity company, it is members of the lim	ss iited
(Signati	up for a member or authorized representative of a member	r)			
(Printer	hita R. Siwlad d or typed name of signee)				
I here comple am fa F.S. confir	eby accept the appointment as registered as y with the provisions of all statutes relative miliar with and accept the obligations of m Or, if this document is being filed to merely m that the limited liability company has be	gent and ago to the prop y position a reflect a ch en notified i	ree to act in this capacity ver and complete performa s registered agent as provi ange in the registered offic in writing of this change.	I further agree to nce of my duties, ar ded for in Chapter ce address, I hereby	nd I 608, v
By	myshood Any Schurch	asst S	ecretary		

(Signature of Registered Agent) Corporation Service Company

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)