## M10000003607

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	—
PICK-UP WAIT MAIL	
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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: Ami Casper acasper5@cscinfo.com

Date: February 12, 2014

Order#: 964085-247

Re: SFI BR VILLA LUISA LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Ami Casper

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, 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.

OF OF MILE ALL	1110 4 1 1 0
1. Name of the limited liability company: SFI BR VILLA LU	JISA LLC
2. (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	/: C/O ISTAR FINANCIAL INC.
	1114 Avenue of the Americas, Satti Floor
	NEW YORK N1 10036
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
08/16/2010	M10000003607
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	the records of the Florida Dept. of State:
Registered Agent:	C T CORPORATION SYSTEM
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD
	PLANTATION FL 33324
NEW Registered Agent:  NEW Registered Office Address:	Corporation Service Company 1201 Hays Street
·——	1201 Hays Street
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee FL 32301
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Floand the business office of the registered agent will be identicability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.  Signature of a tember or authorized representative of a member  Dona Priebe, Authorized Person  Printed or typed name of signee	orida street address of the registered office
I hereby accept the appointment as registered agent and age comply with the provisions of all statutes relative to the proving I am familiar with and accept the obligations of my post hapter 605, F.S. Or, if this document is being filed to meral diability company by:	
corporation betwee Company	Sylvia Queppet, Assistant Vice President
Division of Corporations, P.O. Box 632 FILING FEE: \$25	, , , , , , , , , , , , , , , , , , ,
1 1DHQ 1 EE. 92.	J. V J

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