M10000004429

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SECRETARY OF STATE

FEB 1 7 2013 T. **HAMPTON**



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#: 964085-378

Re: SFI WINDSOR - PEMBROKE PINES 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.

1. N	ame of the limited liability company: SFI WINDS	SOR - PEMBROKE PINES LL	C
2. (a) Principal office address of limited liability con (<i>Note: MUST BE STREET ADDRESS</i>)	npany: c/o iSTar Financial Inc 1114 Avenue of the Ar NEW YORK	nericas, 39th Floor N\ 10036
(b	o) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	NEW TORK	141 10030
10/07	7/2010	M10000004429	
3. D	ate of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office show	n on the records of the Flori	da Dept. of State:
	Registered Agent:	C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD	
	Registered Office Address:		
		PLANTATION	FL 33324
(t	o) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office a	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS		1201 Hays Street	
		Tallahassee	,FL 32301
confi and t liabil the n the o	e limited liability company is not organized under irmed that after the change or changes are made, he business office of the registered agent will be lity company, it is hereby confirmed that the charmembers of the limited liability company or as oth perating agreement of the limited liability company ure of a hemier or authorized representative of a member	the Florida street address of	the registered office fa Florida limited by an affirmative vote of cles of organization or SECRETARE AHASS
	a Priebe, Authorized Person ed or typed name of signee		E P
By:	reby accept the appointment as registered agent of the provisions of all statutes relative to the difference of the obligations of roter 605, F.S. Or, if this document is being filed tess, I hereby confirm that the limited liability conture of Registered Agent Corporation Service Compa		acity. I further agree to formance of my dulies, ent as provided for in the regist of this change.