

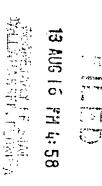
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PICK-UP	☐ WAIT	MAIL		
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Certified Copies Certificates of Status				
Special Instructions to	Eiling Officer			
Special Instructions to Filing Officer:				
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Office Use Only



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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: Vera M. Norris

Date: August 14, 2013

Order#: 752283-265

Re: SUNRISE THIRD (POOL III), LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Vera M. Norris

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.

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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Fursuant 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.

l. Na	me of the limited liability company: SUNRISE THIRD (POC	PL III), LLC	
2. (a) Principal office address of limited liability company: 450 S Orange Ave			
(u)	(Note: MUST BE STREET ADDRESS)	Orlando, FL 32801	
4.			
(b)	Mailing address of limited liability company:	-	Series
	(Note: MAY BE POST OFFICE BOX)		<u> </u>
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	te of filing/registration in Florida	4. Document number	C)
3. Da	te of ming/registration in Florida	4. Document number	7
5 (2)	Registered Agent and Registered Office shown on	tha ragarda of tha Elorida	
J. (a)	Registered Agent and Registered Office shown on	inc records of the Profilea	
	Registered Agent:	Linda A Scarcelli	଼ିଆ <b>ଧୀ</b> ପର
	8		**
	Registered Office Address:	450 S Orange Ave	
		Orlando, FL 32801	
(b)	Enter name of NEW Registered Agent and/or NEV	W Registered Office add	iress:
	NEW Registered Agent:	Corporation Service Company	
	NEW Pagistared Office Address	1201 House Street	
	NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	MUST DE LEURIDA STREET ADDRESS	Tallahassee	,FL 32301
		1 311 31 3 3 3	,t <u>Dozoo i</u>
confirmand the liabilith the method the op	limited liability company is not organized under the limed that after the change or changes are made, the Fie business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of th ical. Or, in the case of a was/were authorized by	e registered office Florida limited an affirmative vote of
	- 5		
	Priebe, Authorized Representative or typed name of signee	<del></del>	
I here compl and I d Chapt addres	by accept the appointment as registered agent and a y with the provisions of all statutes relative to the pro am familiar with and accept the obligations of my po er 608, F.S. Or, if this document is being filed to me ss, I hereby confirm that the limited liability compan	gree to act in this capaci oper and complete perfor sition as registered agen rely reflect a change in th has been notified in wri	ty. I further agree to mance of my duties, t as provided for in he registered office ting of this change.
By: _	Lhace Coruble		
Signatu	re of Registered Agent Corporation Service Company		

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

**FILING FEE: \$25.00** 

INH3;8 (05/08)

Grace Kirby, Asst VP