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(Requestor's Name)					
(Address)					
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(City	y/State/Zip/Phone i	#)			
PICK-UP	WAIT	MAIL			
(Bus	siness Entity Name	e)			
(Document Number)					
Certified Copies	_ Certificates of	of Status			
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AUG 2 6 2014 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corpo							
KRG Lake	Mary, LLC						
·	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Registered A	Agent/Registered Offic	e Change and	I fee(s) are submitted for filing.				
Please return all correspon	dence concerning this	matter to the	following:				
Darlene Rowland							
N	ame of Person						
Kite Realty Group							
F	irm/Company		_				
30 South Meridian St	reet, Suite 1100						
	Address						
Indianapolis, IN 4620	4						
City/S	State and Zip Code						
drowland@kiterealty.	com						
E-mail address: (to b	e used for future annu	al report notif	fication)				
For further information co	ncerning this matter, p	olease call:					
Darlene Rowland		317	713-2753				
Name of I	Person	_ " (Area Code & Daytime Telephone Number				
STREET/COUR Registration Secti Division of Corpo Clifton Building 2661 Executive C Tallahassee, Flori	on orations enter Circle	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314				
Enclosed is a check for the following amount:							
☑ \$25 Filing Fee		□ \$	55 Filing Fee & Certified Copy				

INHS18 (2/14)

30 S. MERIDIAN STREET SUITE 1100 INDIANAPOLIS, IN 46204 317-577-5600 FAX 317-577-5605 www.kiterealty.com

August 25, 2014



Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: Amendments to Certificate of Authority to Transact Business in Florida and Change of Registered Office and Agent

To Whom It May Concern:

Please file all of the enclosed Amendments to Certificate of Authority to Transact Business in Florida <u>FIRST</u>, file Change of Registered Office or Registered Agent <u>SECOND</u>. Please return all certified copies to my attention in the enclosed UPS envelope.

Thank you for your prompt assistance regarding this request. Should you have any questions, please feel free to contact me at 317-713-2753 or at drowland@kiterealtv.com

Sincerely,

Illu Poulund

Real Estate Paralegal

dr:/enclosures



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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: KRG Lake Ma	ıry, LL	_C	; 	
2	(a)	Kite Realty Group		(b)	1	
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ `	(~)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		30 South Meridian Street, Suite 1100			30 Sout	th Meridian Street, Suite 1100
		Indpls, IN 46204			Indpls, I	IN 46204
		03/28/2011		ŀ	M110000	001 5 70
3.		Date of filing/registration in Florida	4.	_		Document number
5.	(a)	CT Corporation System				
٠.	(4)	Registered Agent and Registered Office shown on the records of t	he Flori	da	Dept. of Stat	nte:
		CT Corporation System				
		Registered Office Address (MUST BE FLORIDA STREET A	DDRES	<u>ss</u>)	1	-
		1200 South Pine Island Road				= c -
		Plantation ,FL	3332	4		ECAL AUG
	(b)	Corporation Service Company				326 HASS
	(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ıdd	Iress:	PH PH
		Corporation Service Company				SIATE FLORIDA
		NEW Registered Office Address:				- 5 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2
		1201 Hays Street				
		Tallahasee, FL	3230	1		- -
the ag wa the	ent v ent v es/w e art	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the reg ibility of the li limited	gis co imi d li	stered officempany, it is itself itse	ce and the business office of the registere is hereby confirmed that the change(s) ity company or as otherwise provided in
1 printo No. 18	ovisi e obi mer tifile	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I it does not not a light and agent with a light and agent with a light and a light	perford I for in hereby Sno c	ma n C ca Ok	ance of my Chapter 60 onfirm that (pacity. I further agree to comply with the v duties, and I am familiar with and acce 15, F.S. Or, if this document is being filed I the limited liability company has been

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