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Division of Corporations

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02

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 Standes, 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.

(a)		r F	á					
. (11)	Principal office address of finated liability company, (Note: MUST BE STREET ADDRESS)	(1)	(b)					
	1920 Main Street, Suite 1200		1920 Main Street, Suite 1200					
	Irvine, CA 92614		Irvine, CA 92514					
	06/02/2011		M	11000002833				
	06/02/2011 Date of filing/registration in Florida	- 4.		Досимент п	umber			
(1)	CORPORATION SERVICE COMPANY							
	Registered Agent and Registered Office shown on the records of the Florida Dept. of State. 1201 FAYS STREET Registered Office Address							
			_		. .	. ت		
	TALI AHASSEE , F				į	1015 - 8	~ *;	
	C.T. Corporation System					- I		
	Enter name of NEW Registered Agent and/or NEW Registere	d Office ad	dres:	_		Ţ	1 . 1 	
	1200 South Prie Island Road				-	F.		
	NEW Registered Office Address		<u></u>	-	; - 1 ; -	<u></u>		
	Plantation			_				
e cha gent w as we e arti	Plantation	iws of the if the regi- iability co of the lin e limited	State of Fl stered offic ompany, it i ited liability fability con	orida, it is he e and the bus is hereby contry company of npany.	iness of Traied (fice of the	he registe :hange(s)	
l.	~ ~ \	Pati	icia Belange	r, Secretary				
	ure of a member or duffyrized representative of a member			Printed or type		-	***	
heret ovisi 2 obl.	ov accept the appointment as registered agent and account of all statutes relative to the proper and complete equitions of my position as registered agent as providely reflect a change in the registered affice address. I	tree to ac e perform ed for in C	i in this caj ance of inv Thapter 60	oucity. I furth duties, and I 5, F.S. Or, if	er agre am jam this doc	e to com iliar with nument n	ply with the h and acce s being file show hear	