M1200000505

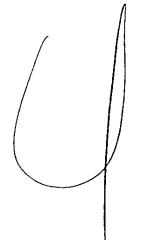
(Req	uestor's Name)			
(Add	ress)			
(Add	ress)			
(City	/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bus	iness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificate	s of Status		
Special Instructions to F	iling Officer:			

Office Use Only



000250229140

08/09/13--01014--012 **25.00



2013 AUG -9 PM I2: 59

D. ERUCE



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

.4 %

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: August 7, 2013

Order#: 745439-039

Re: CLPSUN PARTNERS 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.

OUCA.XCOA

2013 AUG -9 PH 12: 59
SECRETARY OF STATE
PATTINAHASSEE FLORIDA

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

Pursuant 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.

1. Nam	e of the limited liability company: CLPSUN PARTN	IERS III, LLC			
2. (a) I	Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	y: 450 S Orange Ave, 14th FI Orlando, FL 32801			
(b) !	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
10/24/20	011	M12000000505	······································		
3. Date	of filing/registration in Florida	4. Document number			
5. (a)	Registered Agent and Registered Office shown on t	he records of the Florida Do	ept. of	State:	
,	Registered Agent:	Amy J Patterson			
,	Registered Office Address:	450 S Orange Ave, 14th FI Orlando, FL 32801	To the second se	2013 AUG	
(b) l	Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	V Registered Office addre	25.25 25 25.25 25 25 25 25 25 25 25 25 25 25 25 25 2	3-9 P	Section 1
· •	NEW Registered Agent:	Corporation Service Compar		I	Comments
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		1201 Hays Street	ORIGINAL DATE	12: 59	
•		Tallahassee	,FL	32301	
confirm and the liability the men the open	mited liability company is not organized under the land that after the change or changes are made, the Fl business office of the registered agent will be identify company, it is hereby confirmed that the change(s) inbers of the limited liability company or as otherwise rating agreement of the limited liability company.	orida street address of the re cal. Or, in the case of a Flo was/were authorized by an	egistere orida lii affirm:	ed offi nited ative v	ote of
Printed or	riebe, Authorized Person r typed name of signce	-			
_	y accept the appointment as registered agent and a with the provisions of all statutes relative to the pro m familiar with and accept the obligations of my po r 608, F.S. Or, if this document is being filed to me i, I hereby confirm that the limited liability company	gree to act in this capacity. Sper and complete performa sition as registered agent as rely reflect a change in the has been notified in writin	I furth ince of s provid registed g of thi	er agn my du ded fo red of s chai	ee to ities, r in fice nge.
By: Signature	of Registered Agent Corporation Service Company	Elizabeth A Dawson, Asst	VP		

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