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(Cit	ty/State/Zip/Phone	e #)	
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Special Instructions to	Filing Officer:		
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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: Evelyn Wright

Date: July 17, 2013

Order#: 714327-063

Re: ARGENT PROPERTIES 2012, 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: Evelyn Wright 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

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. Name of the limited liability company: ARGENT PF	ROPERTIES 2012, LLC	
2. (a) Principal office address of limited liability comp (Note: MUST BE STREET ADDRESS)	oany: 4 Red Oak Lane, Suite 201 White Plains, NY 10604	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4 Red Oak Lane, Suite 201 White Plains, NY 10604	
11/08/2012	M12000006300	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept.	of State:
Registered Agent:	Capitol Corporate Services, Inc.	
Registered Office Address:	155 Office Plaza Dr., Suite A Tallahassee, FL 32301	0 V SEC
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>I</u>	NEW Registered Office address:	SECRETAR VISION OF C
NEW Registered Agent:	Corporation Service Company	<u> </u>
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street Tallahassee	- 32301 %
If the limited liability company is not organized under to confirmed that after the change or changes are made, the and the business office of the registered agent will be in liability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company or as other limited liabili	e Florida street address of the registentical. Or, in the case of a Florid e(s) was/were authorized by an affirmise provided in the articles of or	stered office a limited irmative vote of
Dona Priebe, Authorized Person Printed or typed name of signee I hereby accept the appointment as registered agent ar comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability company	nd agree to act in this capacity. I fi to proper and complete performance to position as registered agent as pr to merely reflect a change in the reg to bany has been notified in writing o	urther agree to c of my duties, ovided for in istered office f this change.

Signature of Registered Agent
Elizabeth A. Dawson, Asst. Vice President

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

FILING FEE: \$25.00