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O BRUCE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE : 711642 7743020

AUTHORIZATION

COST LIMIT : \$25.00

ORDER DATE : July 5, 2017

ORDER TIME : 10:17 AM

ORDER NO. : 711642-010

CUSTOMER NO: 7743020

CHANGE OF AGENT

NAME: WEST SAN MARINO LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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XX PLAIN STAMPED COPY

CONTACT PERSON: Melissa Zender

EXAMINER'S INITIALS:

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: West San Marine	o, LLC			
2	(a)	201 S. Biscayne Blvd., 22nd Floor, Miami, FL 33131	(b)			
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0).	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
3,		February 7, 2013 Date of filing/registration in Florida	 - 4.	M13000000	0827 cument number	
5.	(a)	Grossman, Stuart I Registered Agent and Registered Office shown on the records of the	he Floride F	lent of State:		
		201 S. Biscayne Blvd., 22nd Floor, Miami, FL 33131 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
					201 TALL	
					7 JUL AHAA	-
	(b)	Corporation Service Company			(7)	
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office addr	<u>ess</u> :	SEE SEE	
		1201 Hays Street			A FLG	FILE
		NEW Registered Office Address:			& 25 TATE DRIDA	
	- -					
		Tallahassee , FL	32301			
the ag	e cha ent v as/wa	imited liability company is not organized under the law inge 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 registe bility con f the limit	ered office and pany, it is here ed liability cor	I the business office of the eby confirmed that the ch mpany or as otherwise pro	e registered nange(s)
	S	M. Gocula	San	gini Goenka, Mar		
	_	ture of a member or authorized representative of a member			nted or typed name of signee	
pr the to	ovisi e obl mer	by accept the appointment as registered agent and agri ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ly reflect a change in the registered office address, I h	ee to act i performan I for in Ch iereby cor	n this capacity nce of my dutie napter 605, F.S nfirm that the l	 I further agree to comp s, and I am familiar with S. Or, if this document is imited liability company 	ply with the and accept being filed has been
no	tifie	d'in writing of this change.		Melissa Ze		
Si	gnatu	re of Registered agent Corporation Service Company	BY: A	sst. Vice Pro	esident	
		District of Commonstitutes D.O. D) - 4337-	Tallahassaa	WI 39314	

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