3/31/2020

Division of Corporations

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(((H20000097030 3)))



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## LLC REGISTERED AGENT CHANGE FEM OCALA LLC

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APR () 1 2020

## Fax Audit Number H20000097030 3

## 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.

l. Nar	ne of the limited liability company: FEM OCALA I	LLC		
7 (2)	2 Changebridge Rd St 201	(b)	2 Changebridge Rd St 201	
2. (3) _	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	- 1°7	Mailing address of limited hability company (Note: May RE POST OFFICE ROS)	
	Montville, New Jerscy 07045	<del></del>	Montville, New Jersey 07045	•
	11/18/2013		M1130000007293	
3.	Date of filing-registration in Florida	4,	Document number	
5. (a)	CORPORATION SERVICE COMPANY			
.'. (d)	Registered Agent and Registered Office shown on the records of a 1201 HAYS STREET  Registered Office Address			2
	TALLAHASSEE , FL	<del></del>	· · · · · · · · · · · · · · · · · · ·	2020 MAR 3 I
(b)	Business Filings Incorporated  Enter name of NEW Registered Agent and/or NEW Registered  1200 South Pine Island Road  NEW Registered Office Address:	Office add	lien.	4H : 11 HA
-1 -1-	Plantation FI  imited liability company is not organized under the lange or changes are made, the Florida street address of	ws of the	State of Florida, it is hereby confirmed that after stered office and the business office of the registere	·d
agent '	will be identical. Or, in the case of a Florida limited li- ere authorized by an attirmative vote of the members i icles of manufactures. The operating agreement of the	of the lin limited	ited liability company or as otherwise provided in liability company.	
		Ev	rin Feliciano, Manager of FEM Holding LLC, Manager of FEM Holding LLC, Manager of Signee	₹2Γ —-
There provis the ob-	nute of a member or millionised representative of a moniber oby acceptative approintment as registered agent and agions of all totalines of active to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered agrice address. It is writing of this change.	ree to ac perform ed for in hereby c		e I <del>N</del> id
SIAM	Division of Corporations • P.O.	Box 632	7• Tallahassee, FL 32314	

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