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SECRETARY OF STATIONS
ON OF CORPORATIONS

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COVER LETTER

TO: Registration Section Division of Corporations							
Styloidi di Corporations							
SUBJECT: Boca Isle Holdings LLC							
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Office Cha	inge and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter	er to the following:						
•							
Name of Person							
name of refoon							
Firm/Company							
•							
Address							
City/State and Zip Code							
documents@incorp.com E-mail address: (to be used for future annual rep	and notification)						
Estitati address, (to be used for future annual rep	on nonteation)						
For further information concerning this matter, please	call:						
~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~							
32 8 at (
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS:	MAILING ADDRESS:						
Registration Section	Registration Section						
Division of Corporations	Division of Corporations						
Clifton Building	P.O. Box 6327						
2661 Executive Center Circle	Tallahassee, Florida 32314						
Tallahassee, Florida 32301							
Enclosed is a check for the following amount:							
2 \$25 Filing Fee	\$55 Filing Fee & Certified Copy						
INHS18 (2/14)							

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. Na	ame of the limited liability company: Boca Isle Hol	ldings	LLC		
	11766 WILSHIRE BLVD. SUITE 1470				WILSHIRE BLVD. SUITE 1470
` ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	LOS ANGELES, CA 90025			LOS AN	NGELES, CA 90025
	12/17/2013		N	1130000	007973
	Date of filing/registration in Florida	- 4.	-		Document number
(a)	C T CORPORATION SYSTEM				
(a)	Registered Agent and Registered Office shown on the records of	of the Flo	rida I	Dept. of St	ate:
	1200 South Pine Island Road			·	
	Registered Office Address (MUST BE FLORIDA STREET	ADDR	ESS)		_
	Plantation , F	`L	33	324	
(b)	InCorp Services, Inc.				
(U)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office	addı	(535)	0F1 27
		_			NOV 27 PH
	17888 67th Court North				_ POR
	NEW Registered Office Address:				OF CORPORATIONS 2% PH 4: 81
	Lovebotch	_			
	Loxanatchee F	`L	33	170	
he changent was/was/was/was/was/was/was/was/was/was/	imited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the ture of a member or authorized representative of a member	aws of the reliability of the	the Segistry conditional limited liamed	ered offingany, it ed liabil bility co	ce and the business office of the regist is hereby confirmed that the change(s ity company or as otherwise provided ompany. Printed or typed name of signee
	ons of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address, and in writing of this change. On behalf of Incorp				y auties, and 1 am familiar with and acce 05, F.S. Or, if this document is being file 11 the limited liability company has been
1	Division of Corporations P.O. FILING				assee, FL 32314