M14 00000 8516

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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07/18/16--01018--019 **25.00

TALLAHASSEE TEUNDA

JUL 19 2016 S. YOUNG



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: July 14, 2016

Order#: 199040-022

Re: HMT 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: Tecora Bell

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.

QUCA.XCOA

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SECRETARY OF STATE ACCOUNTS ACCOUNTS OF STATE

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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: HMT FLORIDA	LLC	
2. (a)	24 WATERWAY AVE, STE. 400	(b)	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	THE WOODLANDS, TX 77380		
	12/11/2013		M14000000516
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T CORPORATION SYSTEM		
()	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State:
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	PLANTATION , FL	33324	
(b)	Corporation Service Company		
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	ess:
	1201 Hays Street NEW Registered Office Address:		
	registered Office Address.		
	Tallahassee	22201	
	, FL	_ 32301	
the cha agent v was/we	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 litere authorized by an affirmative vote of the members of organization or the operating agreement of the	f the registe ability com of the limited lia	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in bility company.
Signa	ture of a member or authorized representative of a member	Jill Ci	mi, Authorized Person Printed or typed name of signee
I here provisi the obl to mere notified	by accept the appointment as registered agent and agi ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	performan ed for in Ch hereby con	n this capacity. I further agree to comply with the uce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Signatu	re of Registered Agent Corporation Service Company		
	Division of Comment of D.O. 1	D (2277	Tollahagasa PF 222144