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(Re	questor's Name)			
(Ad	dress)			
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(Cit	y/State/Zip/Phone	e #)		
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SECRETARY OF STATE
AND ANASSES FI ORION

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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: Grace Kirby grace.kirby@cscglobal.com

Date: October 29, 2015

Order#: 791743-068

Re: RCG-LAKELAND OUTLOTS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Grace Kirby

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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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

(a)	3060 Peachtree RD NW	(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)
	Suite 400		
	Atlanta, GA 30305		
	07/11/2014		4000004941
	Date of filing/registration in Florida	4.	Document number
(a)	C T Corporation System		
(α)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	
	1200 South Pine Island Road		
	Plantation, FL	33324	<u> </u>
(b)	Corporation Service Company		ZOIS NOV
	Enter name of NEW Registered Agent and/or NEW Registered	Office address:	
			ARY SSE
	1201 Hays Street		
	NEW Registered Office Address:		N-2 P 2: 4: TARY OF STATE ASSEE, FLORIO
			A HU
	Tallahassee , FL	32301	
e cha gent v as/wa	imited liability company is not organized under the lavinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the registered ability compared the limited limited limited limited limited liabili	I office and the business office of the regis my, it is hereby confirmed that the change(s iability company or as otherwise provided ity company.
Siona	ture of a member or authorized representative of a member	Dona Pri	ebe, Authorized Person Printed or typed name of signee
hana	by accept the appointment as registered agent and agr 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	ree to act in th performance d for in Chapt	is canacity. I further agree to comply with