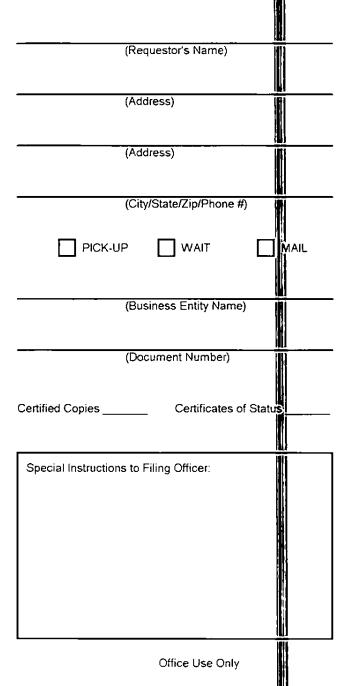
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CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

Marissa Rather-l**o**pez marissa.pitts@cscglobal.com From:

November 20, 2017 Date:

Order#: 916427-017

DAYTONA PROPERTIES GP, 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.

Issue Proof of Filing.

Please return evidence to the following:

Attn: Marissa Rather-lopez c/o Corporation Service Company

251 Little Fal**ls** Drive 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

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.

<i>I</i> * <i>U</i>	riaa	•	fil .			
1. Name of the limited liability company:			AYTONA PROPERTIES GP, LLC			
2	(2)	129 North Patterson Street		(b)	129 Nor	th Patterson Street
۷.	(4)	Principal office address of limited ha (Note: MUST BE STREET A)	ility company DDRESS)			failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Valdosta GA	31601		Valdosta,	GA 31601
		07/23/2014			M1400000	05198
3. ·_		Date of filing/registration in	Florida	4.		Document number
5.	(a)	C T Corporation System Registered Agent and Registered Office show	in on the recor	ds of the Florida	Dept, of State	:
		1200 South Pine Island Road				
		Registered Office Address (MUST BE FI	ORIDA STR	EET ADDRESS	1	
		Plantation		_, FL <u>33324</u>	<u> </u>	
	(b)	Corporation Service Company				
		Enter name of NEW Registered Agent and/o	PNEW Regis	stered Office add	<u>dress</u> :	
		1201 Hays Street		<u> </u>		:7 NG
		NEW Registered Office Address:				7. 6.
				<u>.</u>		₹.
		Tallahassee		_, FL <u>32301</u>	· = .	
a	gent v	will be identical. Or in the case of a l	f lo rida limil of ithe meml	ted hability co bers of the lim	ompany, it is sited liability	orida, it is hereby confirmed that after e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in apany.
Xie E agnie				Jill Cilmi, Authorized Person		
	_	nture of a njember or authorized representative				Printed or typed name of signee
P II Io	rovis 1e ob 1 mer	ions of all statutes relative to the prof ligations of my position as registered ely reflect a change in the registered d in writing of this change.	ed agent an er and com agent as pro office addre	nd agree to act oplete perform ovided for in (ess, I hereby c	t in this cape ance of my o Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been
Signature of Registered Agent Corporation Scrvice Company BY: Grace E. Kirby, Asst. Vice President						rby, Asst. Vice President

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00