

M 14000007213

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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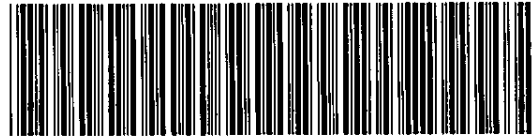
(Business Entity Name)

(Document Number)

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FILED  
14 OCT 22 AM 8:45  
DEPARTMENT OF STATE  
TREASURY/SEC. HENRIDA

OCT 23 2014

C. CARROTHERS



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 346660 8018103

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE : October 22, 2014

ORDER TIME : 1:49 PM

ORDER NO. : 346660-012

CUSTOMER NO: 8018103

CHANGE OF AGENT

NAME: BANYAN STREET/GAP HIDDEN RIVER  
TWO OWNER, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Courtney Williams

EXAMINER'S INITIALS: \_\_\_\_\_

**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. Name of the limited liability company: BANYAN STREET/GAP HIDDEN RIVER TWO OWNER, LLC

2. (a) 390 N. ORANGE AVE. STE 2400 (b) \_\_\_\_\_  
Principal office address of limited liability company: Mailing address of limited liability company:  
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

ORLANDO, FL 32801

3. 10/06/2014 4. M14000007213  
Date of filing/registration in Florida Document number

5. (a) C T CORPORATION SYSTEM  
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

1200 SOUTH PINE ISLAND ROAD  
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  
PLANTATION, FL 33324

(b) Corporation Service Company  
Enter name of NEW Registered Agent and/or NEW Registered Office address:  
1201 Hays Street  
NEW Registered Office Address:  
Tallahassee, FL 32301

FILED  
OCT 22 AM 9:45  
TALLAHASSEE, FLORIDA

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature] Done Priebe, Authorized Person  
Signature of a member or authorized representative of a member Printed or typed name of signee

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

[Signature] BY: Grace E. Kirby, Assistant Vice President  
Signature of Registered Agent Corporation Service Company