M14000008425

(Re	equestor's Name)			
(,	,4400(0.07)			
(Address)				
(Address)				
	6 JOS - 4 77 : 10	- 40		
(CI	ty/State/Zip/Phone	: # <i>)</i>		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(5.	zomoso zmaj vizm	,		
(Document Number)				
Certified Copies	Certificates	of Status		
<u> </u>	- <u> </u>			
Special Instructions to Filing Officer:				
		ŀ		

Office Use Only



800307003658

01/02/18--01013--030 *+35.00

2018 JAN - 2 F# 3: 40

MOSTING RIE



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: December 29, 2017

Order#: 960642-203

Re: VERANO MULTI-FAMILY HOLDING LLC

Enclosed please find:

XX Change of Registered Agent and Office.

YX 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

251 Little Falls 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.

1. N	Same of the limited liability company: VERANO MUL	TI-FAMILY HOI	LDING LLC
2. (a)	_2200 VILLA VERANO WAY	(b)	
(Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(4)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	KISSIMMEE FL 34744		
	11/21/2014	M14	000008425
3.	Date of filing/registration in Florida	4.	Document number
5. (a	CAPITOL CORPORATE SERVICES, INC.		
	Registered Agent and Registered Office shown on the records of	the Florida Dept. o	of State:
	515 EAST PARK AVENUE, 2ND FL		
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS)	
•	TALLAHASSEE , FI	32301	
(b	Corporation Service Company		
(0	Enter name of NEW Registered Agent and/or NEW Registered	l Office address:	
			<u> </u>
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee , FL	32301	
the ch agent was/v	limited liability company is not organized under the law nange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registered ability compan of the limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
	Jel & While	Jill Cilmi, /	Authorized Person
I her provi the oi to me notifi	eature of a member or authorized representative of a member eby accept the appointment as registered agent and agr sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change. Luca Company	performance of d for in Chapte hereby confirm	of my duties, and I am familiar with and accept
	c corporations of vice company	Br. Office I	z. ichoj, rissi. vice i resident