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(R	equestor's Name)			
(Address)				
(A	ddress)			
(C	ity/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies				
Special Instructions to Filing Officer:				

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7. MARKIE



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#: 960642-119

Re: PURE LIVING MULTI-FAMILY HOLDING 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

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. 1	Name of the limited liability company: PURE LIVING M	ULTI-FAMILY HO	LDING LLC
2. (a	2200 VILLA VERANO WAY	(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)
	KISSIMMEE FL 34744		
	04/22/2015	M150000	003051
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 th	e Florida Dept, of Stat	le:
	515 EAST PARK AVENUE, 2ND FL		_
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS)	
•			_
	TALLAHASSEE	22204	_
•	TALLAHASSEE, FL_	32301	- 1
(b	Corporation Service Company		٠. حــِ
ζ.,	Enter name of NEW Registered Agent and/or NEW Registered C	Office address:	-
	1201 Hays Street		
	NEW Registered Office Address:		ĘŞ
			い い
			_
	Tallahassee, FL_	32301	-
the chagent was/v	limited liability company is not organized under the laws ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liab vere authorized by an affirmative vote of the members of ticks of organization or the operating agreement of the li	he registered offic pility company, it i the limited liabilit	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
Sier	aturg of a member or authorized representative of a member	Jill Cilmi, Autho	Printed or typed name of signee
I her provi the oi to me notifi	eb accept the appointment as registered agent and agree sions of all statutes relative to the proper and complete poligations of my position as registered agent as provided rely reflect a change in the registered office address. I he ad in writing of this change.	erformance of my for in Chapter 602 creby confirm that	weith: I further caree to comply with the