M15000010125

(Re	equestor's Name)					
(Address)						
(Address)						
(Ci	ty/State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	Certificates	of Status				
Special Instructions to Filing Officer:						





100286855671

06/16/16--01016--015 **25.00

SECRETARY OF STATE

J. HARRIS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: June 14, 2016

Order#: 172189-036

Re: TWO BROTHERS SUNNY LANE, 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: Janis M. Smith 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

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.	Na	me of the limited liability company: Two Brothers	s Sunny	Lane	e, LLC
2	(a)	1002 East Newport Center Drive, Suite 200		(b)	1002 East Newport Center Drive, Suite 200
£,	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Deerfield Beach, FL 33442		-	Deerfield Beach, FL 33442
			<u></u>		
		12/15/2015			M15000010125
3.		Date of filing/registration in Florida	4.		Document number
5.	(a).	NRAI Services, Inc.			
٥.	(4)	Registered Agent and Registered Office shown on the records	of the Flo	orida I	Dept. of State:
		1200 South Pine Island Road			
		Registered Office Address (MUST BE FLORIDA STREET	ET ADDR	ESS)	
		Plantation	FL_ 33	324	<u>→</u>
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	red Office	e addı	PASS.
		End in in the Wife Weekers Agent and Wife Weekers	TEG OTHE	<u>, 444,</u>	SP or Contraction
		1201 Hays Street			PA II
		NEW Registered Office Address:			
		Tallahassee,	FL 32	301	
the ag	e cha ent v is/w	will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the membe	s of the r d liabilit ers of the	egist y cor limi	tered office and the business office of the registered mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
the	art	icles of organization or the operating agreement of	tne iimii	lea II	
	Siana	ture of a member or authorized representative of a member	-		SETH COHEN., Authorized Person Printed or typed name of signee
	_	· · · · · · · · · · · · · · · · · · ·	noree to	ı act	
pr the to no	nere ovis. e ob mer tifie	ny access the appointment as registered agent and ions of all statutes relative to the proper and compl ligations of my position as registered agent as prov ely reflect a change in the registered office address d in writing of this change.	lete perfe ided for s, I hereb	orma in C by co	in this capacity. I further agree to comply with the ance of my duties, and I am familiar with and accept Thapter 605, F.S. Or, if this document is being filed onfirm that the limited liability company has been
Si	gnati	urc of Registered Agent Corporation Service Compan	ıy BY	′; Gr	race E. Kirby, Asst. Vice President
			0 D	(20=	(- IT-II-) IDF 0424.4