## 116000000236

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DIVISION OF CONTICENTIONS

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## **COVER LETTER**

INHS18 (2/14)

	Registration Section Division of Corporations						
SUBJE	CRE Woodcrest LLC						
	Name of Limited Liability Company						
Dear Sir	r or Madam:						
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.							
Please return all correspondence concerning this matter to the following:							
Edwar	rd Price						
	Name of Person	<del></del>					
Lincolr	n Property Company						
	Firm/Company						
111 No	orth Magnolia Avenue, Suite 150	0					
	Address						
Orland	lo, FL 32801						
	City/State and Zip Code	<del></del>					
eprice(	@lpc.com						
E-1	mail address: (to be used for future annual	report notification)					
For furth	ner information concerning this matter, ple	ease call:					
Edward		407 872-3500					
	Name of Person	Area Code & Daytime Telephone Number					
	STREET/COURIER ADDRESS:	MAILING ADDRESS:					
Registration Section Division of Corporations		Registration Section Division of Corporations					
	Clifton Building	P.O. Box 6327					
2	2661 Executive Center Circle	Tallahassee, Florida 32314					
•	Tallahassee, Florida 32301						
]	Enclosed is a check for the following amount:						
(	절 \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					

## 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	ame of the limited liability company: CRE Woodcre	st LLC				
2. (a)	c/o Warner Woodcrest LLC	(b	(b) c/o Warner Woodcrest LLC			
• /	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company.  (Note: MAYBE POST OFFICE BOX)		
	2255 S. 5370 W.		2255 S.	5370 W.		
	West Valley City, UT 84120	<del></del>	West Va	lley City, UT 84120		
	01/11/2016		M160000	00236		
3.	Date of filing/registration in Florida	4.	<u> </u>	Document number		
5. (a)	C T Corporation System					
	Registered Agent and Registered Office shown on the records of the 1200 South Pine Island Road	ne Florida	Dept. of State			
	Registered Office Address	FILED 17 AUG-7 PH 3: 34 OLVISION OF CONTENSIONS				
	Plantation,FL	33324		K OF COS		
(b)	Lincoln Property Company of Florida Inc.			ن الله الله الله الله الله الله الله الل		
(0)	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	lress	i		
	111 North Magnolia Avenue, Suite 1500			Č.		
	NEW Registered Office Address:					
	Tallahassee, FL_3	32303				
agent w	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	ne regist vility cou the limi	tered office npany, it is ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in		
		Bac	Nguyen,	Manager		
	ure of a member or authorized representative of a member			Printed or typed name of signee		
the obli to mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete paigations of my position as registered agent as provided by reflect a change in the registered office address. I he is in writing of this change.	v to act i erforma for in C vreby co	in this capa nce of my a hapter 605, nfirm that to	city. I further agree to comply with the hties, and I am familiar with and accept F.S. Or, if this document is heing filed he limited liability company has been		
Signatur	Conference Agent					