## M1600000 2697

(Red	questor's Name)	*	
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06/29/16--01015--015 \*\*25.00

SECRETARY OF STATE ALL AHASSEE, FLORIDA

Jun 30 2016 S. YOUNG



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscqlobal.com

Date: June 27, 2016

Order#: 182141-012

Re: 2061 S BYRON BUTLER PKWY, 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: Grace Kirby

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.

2. (a)	19200 Van Karman Avenue, Suite 945	(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)
	Irvine, CA 92612		
	03/31/2016		M16000002697
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	Incorporating Services, Ltd., Inc.		
(,	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State:
	1540 Glenway Drive		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
			<b>*</b> # # # # # # # # # # # # # # # # # # #
	Tallahassee , FI	2_32301	16 JUN 29 AM II: 48
(b)	Corporation Service Company		70
(6)	Enter name of NEW Registered Agent and/or NEW Registered	l Office addre	<u>ss</u> s:
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassee , FI	32301	
the chagent was/w	limited liability company is not organized under the latange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited litere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the register ability composite of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
<u> </u>	026	Dona I	Priebe, Authorized Person
I here provis the ob to mer	native of a member or authorized representative of a member  by accept the appointment as registered agent and age ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I d in writing of this change.	ree to act in performant d for in Cha hereby conf	Printed or typed name of signee  this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00