## Mi6 000004030

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





200355241132

11/16/20--01029--005 \*\*25.00

KA/RC/(N8

DEC 2 12 2020 LALBRITTON



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscqlobal.com

Date: November 12, 2020

Order#: 500155-052

Re: M/I HOMES OF SARASOTA, 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: Erika Zavala Daza

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.

l. Na	ame of the limited liability company:	SARAS	SOTA, LLO	c	
2. (a)	4131 Worth Avenue		(b) 4131 Worth Avenue		
2. (u)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Suite 500		Suite 5	500	
	Columbus, OH 43219	<u> </u>	Colum	ibus, OH 43219	
	05/19/2016		M16000	0004030	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	C T CORPORATION SYSTEM				
J. (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	1200 SOUTH PINE ISLAND ROAD				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			<u> </u>	
				20	
	PLANTATION	33324		2029:	
	, FI	- <u></u>	<del> </del>		
(b)				<del></del>	
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office a	ddress:		
	Corporation Service Company			<del></del> <u>∵</u>	
	NEW Registered Office Address:			_	
	1201 Hays Street				
	Tallahassee	32301			
	FI	32301		<u> </u>	
change agent v was/w	imited liability company is not organized under the late or changes are made, the Florida street address of the 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	registe ability of of the li	red office company, mited liab	and the business office of the registered it is hereby confirmed that the change(s) oility company or as otherwise provided in	
	Xie & Cioni	Jil —	I Cilmi, Au	uthorized Person	
I here provisi the obi to mer notifie	by accept the appointment as registered agent and aginous of all statutes relative to the proper and complete ligations of my position as registered agent as provide elv reflect a change in the registered office address, I din writing of this change.	ree to a perform d for in hereby	ct in this c nance of n Chapter ( confirm th	Printed or typed name of signee capacity. I further agree to comply with the ny duties, and I am familiar with and acceed 5.5. Or, if this document is being file that the limited liability company has been	
Signatu Grace	re of Registered Agent ` E. Kirby, Asst. Vice President of Corporation Service	e Comp	any		

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