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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.

I. Na	me of the limited liability company: ROCHIFLPRE	SERVE	AKELAND	HILLSAILG
2. (a) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 5295SCOMMERCEDR., SUITE100	(•	Mailing address of limited liability company: (Note: MAY BE POST OF FICE BOX) MMERCEDR.,SUITE100
	MURRAY,UT84107		MURRAY	7.UT84107
	06:27:2016		M16000005	1143
3. 5. (a)	Date of filing/registration in Florida CORPORATIONSERVICECOMPANY			Document number
. ,	Registered Agent and Registered Office shown on the records of	of the Florid	ta Dept, of Stat	e.
	Registered Office Address 1201HAYSSTREET	TADDRE:	<u> </u>	2017 7417
	TALLAHASSEE, I	FL_32301-	2525	- EC.
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u> CTCorporationSystem <u>NEW Registered Office Address:</u> 1200SouthPineIslandRoad		·	S.IA Logs
	Plantation,	FL_33324		_
the chi agent was/w the art Signo I here provis the ob to men notific By:	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the proper and completely accept the appointment as registered agent and completely accept the appointment as registered agent and completely reflect a change in the registered office address, and in writing of this change. James M. Formure of Registered Agent.	laws of the of the replacement of the limited State of the limited state of the limited state of the limited for in the lapin	ne State of Figistered office company, it imited liability coephanie Boch	its hereby confirmed that the change(s) ity company or as otherwise provided in mpany. Printed or typed name of signee
4	Division of Corporations P.C), Box 63 ; FEE: S	27 ⁴ Tallaha 25 €0	nssee, FL 32314