M14000008274

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

Office Use Only



200293030372

12/21/16--01019--001 **25.00

J. HARRIS



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscglobal.com

Date: December 19, 2016

Order#: 382233-006

Re: ALTA CHUTES I, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Marissa Rather-lopez 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. N	lame of the limited liability company: ALTA CHUTES	I, LLC			
2. (a)	2003 WESTERN AVENUE, SUITE 340)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	SEATTLE, WA 98121	_			
	10/17/2016		M16000008274		
3.	Date of filing/registration in Florida	4.	Document nui	mber	
5. (a					
	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:		
	Registered Office Address (MUST BE FLORIDA STREET)	<u> 4DDRESS)</u>		-	
	1200 SOUTH PINE ISLAND ROAD			5	
	PLANTATION , FL	33324			
				2	
(b)			*****		
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	90 : 11 kg	
	1201 Hays Street			86 ∰	
	NEW Registered Office Address:		· · · · · · · · · · · · · · · · · · ·	•	
	Tallahassee , FL	32301			
the chagent was/	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia very authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the regis ability co of the limi	tered office and the busin mpany, it is hereby confir ted liability company or a	ess office of the registered med that the change(s)	
	Xel & Whee	Jill C	ilmi, Authorized Person		
I her provi provi the old to me notifi	pure of a member or authorized representative of a member seby accept the appointment as registered agent and agricults of all statutes relative to the proper and complete ligations of my position as registered agent as providerely reflect a change in the registered office address, I is a writing of this change. The property of Registered Agent Corporation Service Company	performa d for in C hereby co	Printed or typed in this capacity. I further ince of my duties, and I ar hapter 605, F.S. Or, if th infirm that the limited liab race E. Kirby, Assistant	agree to comply with the n familiar with and accept is document is being filed pility company has been	

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