

M16000008403

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Document Number)

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**COGENCYGLOBAL**

115 N CALHOUN ST., STE. 4  
TALLAHASSEE, FL 32301  
**866.625.0838**  
COGENCYGLOBAL.COM

Date: 6/15/2018

Account#: 120000000088

Name: Merritt Knickle

Reference #: C022727

Entity Name: AOF WATERVIEW HOLDINGS, LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☒ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other \_\_\_\_\_

Authorized Amount: \$25

Signature: Mark

@CORPORATE HQ  
COGENCY GLOBAL INC.  
10 E 40<sup>TH</sup> ST, 10<sup>TH</sup> FL  
NY, NY 10016  
800.221.0102  
+1.212.947.7200

@EUROPEAN HQ  
COGENCY GLOBAL (UK) LIMITED  
REGISTERED IN ENGLAND & WALES  
REGISTRY NO: 072  
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COGENCY GLOBAL (HK) LIMITED  
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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, 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. Name of the limited liability company: AOF WATERVIEW HOLDINGS, LLC

2. (a) Principal office address of limited liability company: 4401 NORTHSIDE PARKWAY STE 711  
(Note: **MUST BE STREET ADDRESS**)

ATLANTA, GA 30327

(b) Mailing address of limited liability company: 4401 NORTHSIDE PARKWAY STE 711  
(Note: **MAY BE POST OFFICE BOX**)

ATLANTA, GA 30327

October 20, 2016

M16000008403

3. Date of filing/registration in Florida

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent:

CT CORPORATION SYSTEM

Registered Office Address:

1200 SOUTH PINE ISLAND ROAD

PLANTATION, FL 33324

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW** Registered Agent:

COGENCY GLOBAL INC.

**NEW** Registered Office Address:

115 North Calhoun St., Suite 4

**(MUST BE FLORIDA STREET ADDRESS)**

Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/S/ Kathryn T. Walker

Signature of a member or authorized representative of a member

Kathryn T. Walker

Printed or typed name of signer

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

/S/ Tim Mayville

Signature of Registered Agent

Tim Mayville, Assistant Secretary

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314**

**FILING FEE: \$25.00**