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12/22/2017

To

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations Fax Number : (850)617-6383

From:

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	Phone Fax Number	(512)418-6949 (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

-	LLC REGISTERED AGENT CHANGE ROC HI FL INDIGO WEST, LLC			
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To:

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.

Florida. L Name of the limited liability company: ROCHIFLINDIGOWEST, LEC (b) 2. (a) _ Mailing address of limited liability company: Principal office address of limited liability company: (Note: MLAY BE POST OFFICE BOX) (Note: MUST BE STREET ADDRESS) 5295SCOMMERCEDR.,SUITE100 5295SCOMMERCEDR.,SUITE100 MURRAY, UT84107 MURRAY UT84107 11/01/2016 M1600008748 Document number Date of filing/registration in Florida 3. CORPORATIONSERVICECOMPANY 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1201HAYSSTREET 32301-2225 DEC 22 AN II: TALLAHASSEE (b)Enter name of NEW Registered Agent and/or NEW Registered Office address: CTCorporationSystem NEW Registered Office Address: 1200SouthPineIslandRoad FL 33324 Plantation

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.

Ctogly, Pro	StephanieBoehm
Signature of a member or authorized representative of a member	Printed or typed name of signee
I hereby accept the appointment as registered agent and agent provisions of all statules relative to the proper and completer the obligations of my position as registered agent as provided to merely reflect a change in the registered office address, I h notified in writing of this change. By: CTC orporationSystem By: Signature of Registered Agent Division of Corporations• P.O. B	on 17 Fox 6327• Tallahassee, FL 32314
FILING FI	5E: 525.00