M1700000 2028

(Re	equestor's Name)									
(Ad	Idress)									
(Ad	ldress)									
(City/State/Zip/Phone #)										
PICK-UP	☐ WAIT	MAIL								
(Bi	usiness Entity Nan	ne)								
(Do	ocument Number)									
Certified Copies	_ Certificates	s of Status								
Special Instructions to	Filing Officer:									
	 .									

Office Use Only



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NM



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: July 13, 2018

Order#: 289257-010

Re: APEXONE-COLLIER TUSCANY HOLDING COMPANY, 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: Ami Casper

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.

. (a)	2603 Augusta Drive, Suite 400 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(t	o)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	Houston	T> 77057					. ,			
	03/09/2017			M1700	00002028					
,	Date of filing/regis	stration in Florida	-4.		Document nun	nber				
. (a)	C T Corporation System									
. (4)		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:								
	1200 South Pine Island R	.oad								
	Registered Office Address (M		T ADDRES!	<u>5)</u>						
						<u></u>	2			
	Plantation	, 1	-L <u>3332</u> 4	1		LLAHASS	7 ו שע וווו	77		
(b)	Corporation Service Comp	-				ASSEC.				
	Enter name of <u>NEW Registered</u> 1201 Hays Street	Agent and/or NEW Register	<u>ed Office ad</u>	<u>dress</u> :		FLORIE	群10: 2			
	NEW Registered Office Address	:				****				
	Tallabassoo		22201							
	Tallahassee	, J	FL32301							
ie cha gent w as/we	mited liability company is ringe or changes are made, the vill be identical. Or, in the care authorized by an affirmatic of organization or the o	e Florida street address case of a Florida limited tive vote of the members	of the regi liability co s of the lin	stered of ompany, nited liab	fice and the busine it is hereby confinitive to an interest in the company or a	ess office oned that the	of the re ne chang	gistered gc(s)		
	Jue & alm	<u>i</u>	Jill	Jill Cilmi, Authorized Person						
herel	we of member of authorized reports of all statutes relative to igations of my position as relative to the reflect a change in the relations of my position as relative to the reflect a change in the relation writing of this change.	s registered agent and a	gree to ac te perform led for in (I hereby c	t in this c ance of n Chapter (onfirm th	Printed or typed is apacity. I further my duties, and I am 605, F.S. Or, if this at the limited liab	agree to c	romuly v	vith the d accept ng filed been		