

11/13/2017

M17000006252

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From:
Account Name : CNL FINANCIAL GROUP, INC.
Account Number : 113615003526
Phone : (407)650-1552
Fax Number : (407)540-2699

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

Email Address: nicole.osterlag@KKR.com

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17 NOV 13 AM 11:24
TALLAHASSEE FLORIDA

2017 NOV 13 PM 3:02

REGISTERED AGENT CHANGE
CCT HOLDINGS II LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$43.75

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Corporate Filing Menu

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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.

1. Name of the limited liability company: CCT Holdings II LLC

2. (a) <u>Principal office address of limited liability company:</u> <u>(Note: MUST BE STREET ADDRESS)</u> <u>450 S. Orange Avenue</u> <u>Orlando, FL 32801</u> <u>07/24/2017</u> Date of filing/registration in Florida	(b) <u>Mailing address of limited liability company:</u> <u>(Note: MAY BE POST OFFICE BOX)</u> <u>450 S. Orange Avenue</u> <u>Orlando, FL 32801</u> <u>M17000006252</u> Document number
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3. 07/24/2017 Date of filing/registration in Florida 4. M17000006252 Document number

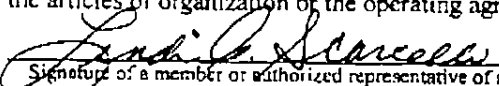
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
Linda A. Scarcelli

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
450 S. Orange Avenue
Orlando, FL 32801

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

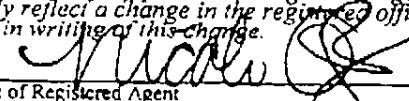
Nicole Ostertag
NEW Registered Office Address:
201 S. Orange Avenue, Ste. 100
Orlando, FL 32801

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.


Signature of a member or authorized representative of a member

Linda A. Scarcelli
Printed or typed name of signee

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.


Signature of Registered Agent

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17 NOV 13 AM 11:26
STATE OF FLORIDA
TALLAHASSEE