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A. BUTLER

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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.

| 301 E LA FT LAUD 07/10/201 3. D Registered 6 Registered 6 One Fina FT Laude C T Corpor (b) Enter name 6 | OHN F Office Address (MUST BE FLORIDA STREET Ancial Plaza, 100 SE Third Ave., Suite 1850 | - 4. the Florid | 301 E LAS FT LAUDE M18000006 | Document number |
|--|--|--|---|--|
| 301 E LA FT LAUD 07/10/201 3. D Registered 2 Registered 2 Registered 5 C T Corpor (b) Enter name 3 NEW Registered 5 NEW Registered 5 NEW Registered 6 | (Note: MUST BE STREET ADDRESS) AS OLAS BLVD #700 BERDALE, FL 33301 8 Pate of filing/registration in Florida OHN F Agent and Registered Office shown on the records of the state of th | the Florid | 301 E LAS FT LAUDE M18000006 | (Note: MAY BE POST OFFICE BOX) S OLAS BLVD #700 ERDALE, FL 33301 5588 Document number |
| FT LAUD 07/10/201 3. D RIZZO, JO Registered O Registered O One Fina FT Laude C T Corpor (b) Enter name of the series o | PERDALE, FL 33301 8 Pate of filing/registration in Florida OHN F Agent and Registered Office shown on the records of the shown of of | the Florid | FT LAUDE | ERDALE, FL 33301 5588 Document number |
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| 5. (a) RIZZO, JO Registered A R | OHN F Agent and Registered Office shown on the records of the office Address (MUST BE FLORIDA STREET And Proceedings of the Incial Plaza, 100 SE Third Ave., Suite 1850 | the Florid | | |
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| One Fina FT Laude C T Corpor (b) Enter name of the series of the ser | ncial Plaza, 100 SE Third Ave, Suite 1850 | 1DDRES | <u>S)</u> | |
| FT Laude C T Corpor (b) Enter name NEW Regis 1200 Sout | | | | |
| (b) C T Corpor Enter name NEW Regis 1200 Sout | | | | |
| Enter name of NEW Regis 1200 Sout | rdale, FL | | | |
| NEW Regis | ration System | | | |
| 1200 Sout | of NEW Registered Agent and/or NEW Registered | Office ac | ldress: | |
| 1200 Sout | | | | |
| | stered Office Address: | | | |
| Dioptation | h Pine Island Road | | | |
| гананоп | . FL | 33324 | | |
| the change or cha agent will be iden was/were authoriz | ility company is not organized under the lavinges are made, the Florida street address of tical. Or, in the case of a Florida limited lized by an affirmative vote of the members of anization or the operating agreement of the | vs of the the reg ability c of the lin limited | istered office ompany, it is nited liability liability com | and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in apany. |
| Signature of a mem | ber or authorized representative of a member | 1 in | 1 M. Benter, A | Assistant Secretary Printed or typed name of signee |
| I hereby accept to provisions of all s the obligations of to merely reflect a notified in writing | he appointment as registered agent and agr tatutes relative to the proper and complete my position as registered agent as provided t change in the registered office address, 1 h t of this change, yn A. Widdoes | ve to ac perforn d for in vereby c | t in this cape tance of my c Chapter 605 confirm that i | icity. I further agree to comply with the |