

| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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Office Use Only



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## FLORIDA DEPARTMENT OF STATE **Division of Corporations**

September 20, 2016

CT

SUBJECT: CSX REALTY DEVELOPMENT, LLC

Ref. Number: M9700000544

We have received your document for CSX REALTY DEVELOPMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 716A00020090

CT COP

\*RE-SUBMIT\*

Please retain original filing date of submission 9/19

www.sunbiz.org

September 19, 2016

Department of State, Florida Clifton Building 2611 Executive Center Circle Tallahassee FL 32301

Re:

Order #: 10161056 SO

Customer Reference 1: None Given

Customer Reference 2: None Given

Dear Department of State, Florida:

Please obtain the following:

CSX Realty Development LLC (GA)

Change of Agent

Florida

Enclosed please find a check for the requisite fees. Please return document(s) to the attention of the undersigned.

If for any reason the enclosed cannot be processed upon receipt, please contact the undersigned immediately at (850) 222-1092.

Thank you very much for your help.

Sincerely,

Connie R Bryan Senior Fulfillment Specialist Connie.Bryan@wolterskluwer.com

## 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.

|  | ame of the limited liability company: CSX REALTY D   |  |   |
|--|--|--|---|
|  | Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   |  | Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)   |
| 3.<br>5. (a)   | 8/21/1997  Date of filing/registration in Florida  CORPORATE CREATIONS NETWORK, INC.   |  | 7000000544  Document number   |
| /. (a)   | Registered Agent and Registered Office shown on the records of   | the Florida Dep  | ot. of State:   |
|  | Registered Office Address (MUST BE FLORIDA STREET) 11380 PROSPERITY FARMS ROAD #221E   | ADDRESS)   | AM M  |
|  | PALM BEACH GARDENS , FL  | 33410  | <del></del>   |
| (b)  | Enter name of NEW Registered Agent end/or NEW Registered   | Office address   |   |
| (b)  | Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u> C T Corporation System  NEW Registered Office Address: 1200 South Pine Island Road  | Office address   | <u>;</u>  |
| (b)  | C T Corporation System  NEW Registered Office Address: 1200 South Pine Island Road   | Office address   |   |
| f the li<br>he cha<br>gent w<br>vas/we<br>he artic   | C T Corporation System  NEW Registered Office Address: 1200 South Pine Island Road  Plantation , FL  mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia tree authorized by an affirmative vote of the members of cles of organization or the operating agreement of the ure of a member or authorized representative of a member  | ys of the State the registere ability compared the limited limited | te of Florida, it is hereby confirmed that after ed office and the business office of the register any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.  KIM R. BONGIOVANNI CORPORATE SECRETARY   |
| f the line chargent was/we he article for the colling of the colli | NEW Registered Office Address:  1200 South Pine Island Road  Plantation ,FL  mited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited limited by an affirmative vote of the members of cles of organization or the operating agreement of the ure of a member or authorized representative of a member of a membe | ys of the State the registere ability compared the limited limited | te of Florida, it is hereby confirmed that after ed office and the business office of the register any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company.  KIM R. BONGIOVANNI  CORPORATE SECRETARY  his capacity. I further agree to comply with the company of the company of the company of the company of the company has been that the limited liability company has been |

FILING FEE: \$25.00

INHS18 (2/14)