M99000001223

(R	equestor's Name)	
(A	ddress)	<u> </u>
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(C	ity/State/Zip/Phone	· #)
PICK-UP	☐ WAIT	MAIL
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EXAMINER



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DEPARTMENT OF STREET
IVENUE OF CORPORATIONS

TO ACKHURLEDGE TO ACKHURLEDGE



ORPORATION SERVICE COMPANY.

ACCOUNT NO. : 12000000195

REFERENCE : 860048 7830453

AUTHORIZATION

COST LIMIT

ORDER DATE : July 27, 2011

ORDER TIME : 2:27 PM

ORDER NO. : 860048-006

CUSTOMER NO: 7830453

CHANGE OF AGENT

NAME: GFS RIVER BEND LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: GFS RIVER B	END LLC
 (a) Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) 	2801 Alaskan Way Suite 200 Seattle, WA 98121 2801 Alaskan Way Suite 200
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2801 Alaskan Way Suite 200 Seattle, WA 98121
08/04/1999	M99000001223
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	NRAI Services, Inc.
Registered Office Address:	515 E. Park Avenue Tallahassee, FL 32301
NEW Registered Agent: NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Corporation Service Company 1201 Hays Street Tallahassec FL 32301
If the limited liability company is not organized under the latter the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. Maure Cittle!	address of the registered office and the business se of a Florida limited liability company, it is an affirmative vote of the members of the limited
(Signature of a member or authorized representative of a member)	
Maureen Cathell, Authorized Person (Printed or typed name of signes)	
I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the provisions of all statutes relative to the provision of all statutes relative to the provision of the first with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified by: (Signature of Registered Agent) Corporation Service Company	gree to act in this capacity. I further agree to per and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change. Grace E. Kirby, Assistant VP
Division of Corporations, P.O. Box	

FILING FEE: \$25.00

INHS18 (05/08)