

1799000001694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

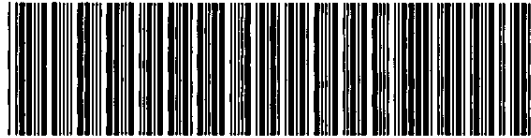
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

[Handwritten signature]

SECRET
102 & 130
OCT 2 2014

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Schreiber Investments, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adam Saldana

Name of Person

Registered Agent Solutions, Inc.

Firm/Company

1701 Directors Blvd. Suite 300

Address

Austin, TX 78744

City/State and Zip Code

clientservices@rasi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Saldana at (888) 705-7274

Name of Person

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 605.0114, 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: Schreiber Investments, LLC

2. (a) Principal office address of limited liability company: 620 NEWPORT CENTER DRIVE
(Note: MUST BE STREET ADDRESS)

SUITE 1300
NEWPORT BEACH, CA 92660

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

620 NEWPORT CENTER DRIVE
SUITE 1300
NEWPORT BEACH, CA 92660

10/25/1999

3. Date of filing/registration in Florida

4. Document number

M99000001694

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

Registered Agent:

C T CORPORATION SYSTEM

Registered Office Address:

1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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

NEW Registered Agent:

Registered Agent Solutions, Inc.

NEW Registered Office Address:

(MUST BE FLORIDA STREET ADDRESS)

155 Office Plaza Dr.

Suite A

Tallahassee, FL 32301

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.

Adam Saldana
Signature of a member or authorized representative of a member

Adam Saldana, Attorney-in-Fact

Printed or typed name of signer

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.

Adam Saldana
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
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(Note: MUST BE STREET ADDRESS)
SUITE 1300
NEWPORT BEACH, CA 92860

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(Note: MAY BE POST OFFICE BOX)
620 NEWPORT CENTER DRIVE
SUITE 1300
NEWPORT BEACH, CA 92860

10/25/1999

3. Date of filing/registration in Florida

M99000001684

4. Document number

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

Registered Agent:

C T CORPORATION SYSTEM

Registered Office Address:

1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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

NEW Registered Agent:

Registered Agent Solutions, Inc.

NEW Registered Office Address:

155 Office Plaza Dr.

(MUST BE FLORIDA STREET ADDRESS)

Suite A

Tallahassee, FL 32301

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Adam Saldana
Signature of a member or authorized representative of a member

Adam Saldana, Attorney-in-Fact

Printed or typed name of signee

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Adam Saldana
Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00