N0100004571

(Requestor's Name)				
(Address)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
<u> </u>				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(DUSINESS ETIMY NAME)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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C. GOLDEN NOV 3 0 2018



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: November 19, 2018

Order#: 495727/068

Re: NHDC SANDPIPER VILLAGE APARTMENTS, INC.

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$35.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corpo er to change its registered off	502, 617.0502, 607.1508, or 617.1508, Florida Statutes, pration organized under the laws of the State of Florida Sice or registered agent, or both, in the State of Florida.	this	
		OPIPER VILLAGE APARTMENTS, INC. Valton Avenue, Tarpon Springs, FL 34689		
2. The principa	office address: 300 3000 V	validit Avenue, Tarport Springs, FL 34689		
3. The mailing	address (if different): Attn: R	Robert Diaz, 9421 Haven Avenue, Rancho Cucamonga,	CA 9173	 0
4. Date of incor	poration/qualification: 06/2	8/2001 Document number: N01000004571		
5. The name and		registered agent and registered office on file with the		
	C T Corporation System			
	1200 South Pine Island Roa	ad	💊	
	Plantation, FL 33324	Ž.	∰. 1918)	
6. The name and (if changed):	I street address of the new reg	gistered agent (if changed) and /or registered office	7384 24018 12 408 8108	
	Corporation Service Compa	iny m		£
	1201 Hays Street	<u></u>	1: 02	ď
		P.O. Box NOT acceptable	7 ~	
	Tallahassee	FL 32301		
The street addre as changed will	ss of its registered office and be identical.	the street address of the business office of its registere	d agent,	
Such change wa authorized by th	s authorized by resolution due board, or the corporation h	lly adopted by its board of directors or by an officer so as been notified in writing of the change.		
twond		Robert Diaz, Secretary		
	e of an officer of director	Printed or typed name and title	 -	
performance of ragent. Or, if this hereby confirm to	ny duties, and I am familiar document is heing filed mer	d agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registe rely to reflect a change in the registered office address, a notified in writing of this change.	red I	
By: Cly	n Keil	11/19/2018		
Signa	sture of Registered Agent	Date		
If signing on beh	alf of an entity:			
Ami M. Casper, A	Asst. Vice President			
Тур	ed or Printed Name			

* * * FILING FEE: \$35.00 * * *