## P000 000 51531

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19 AUG 20 PM 2: 24
SECRETARY OF STATE
TALL ARASSEE, FLORIDA

AUG 30 7971

TOCHROEDER



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: August 16, 2019

Order#: 866093/044

Re: SAH 2001 FUND I MM, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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:Soraya Sariaslani 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 cha	inge is submitted for a corporation	7.0502, 607.1508, or 617.1508, Florida : organized under the laws of the State of _ registered agent, or both, in the State of I	FL	4us 	-
1. The name of (	the corporation: SAH 2001 FUND I	MM, INC.			
2. The principal	office address: 18100 Von Karmar	n Avenue, Suite 500, Irvine, CA 92612	<del></del>		
3. The mailing a	ddress (if different):				
4. Date of incorp	poration/qualification: 05/25/2000	Document number: P000000	)51531		
	I street address of the current regist tment of State: (If resigned, enter r	ered agent and registered office on file weekigned)	ith the		
	CT CORPORATION SYSTEM				
	1200 S. PINE ISLAND ROAD				
	PLANTATION, FL 33324			19	
6. The name and (if changed):		d agent (if changed) and /or registered of	HASSER HANTAN	19 AUG 20	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
	Corporation Service Company		- TS	PM 2: 24	
		x NOT a ceptable	STATE STATE	2: 21	
	Tallahassee	x NOT a ceptable  FL 32301	<i>&gt;</i>	•	
The street address changed will	ess of its registered office and the s be identical.	street address of the business office of its	s register	ed age	nŧ,
Such change wa	is authorized by resolution duly ad	lopted by its board of directors or by an en notified in writing of the change.	officer so	)	
X:	st. C. C. Quille rector	Jill Cilmi, Vice President			
Signath	te of an öfficer of director	Printed or typed name and till	r.		-
I further agree to performance of agent. Or, if the hereby confirm	to comply with the provisions of all my duties, and I am familiar with	ent and agree to act in this capacity. Il statutes relative to the proper and com and accept the obligation of my position o reflect a change in the registered offic fied in writing of this change.	i as regisi	tered s, l	
By: Yima.	Takure of Registered Agent	08/06/2019			
Sign	nature of Registered Agent	Date		<del></del>	
If signing on be	half of an entity:				
	Assistant Vice President				
T's	oped or Printed Name				

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.Q. BOX 6327, TALLAHASSEE, FL 32314

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