

P12000062038

Jack Maag

(Requestor's Name)

Shumaker, Corp & Kendrick

(Address)

P.O. Box 49948

(Address)

Sarasota, FL 34230-6948

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

(Document Number)

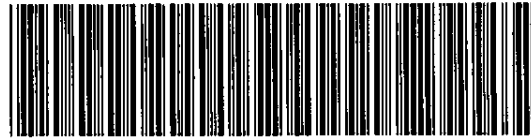
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TALLAHASSEE FL 32304

PACheng

01-28-14

DC

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: C. PLAZA OUTPARCEL DEVELOPMENT CORP.
2. The principal office address: 2941 Seasons Blvd.
Sarasota, Florida 34240
3. The mailing address (if different): P.O. Box 18419
Sarasota, Florida 34276
4. Date of incorporation/qualification: 07/13/2012 Document number: P12000062038
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Jeffrey SW Russell

240 South Pineapple Avenue, 10th Floor

Sarasota, Florida 34236

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Jan W. Pitchford

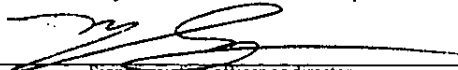
240 S. Pineapple Avenue, 10th FL

P.O. Box NOT acceptable

Sarasota, Florida 34236

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.



Signature of an officer or director

M. L. Fink Program

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.



Signature of Registered Agent

1/16/14

Date

If signing on behalf of an entity:

Jan W. Pitchford

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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14 JAN 21 PM 4:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA