## P980000 73331

(Requestor's Name)
(Address)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bocament Namoer)
Certified Copies Certificates of Status
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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.sarialsani@cscglobal.com

Date: August 16, 2019

Order#: 866093/052

Re: SAH 99 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 ch	ange is submitted for a cor	7.0502, 617.0502, 607.1508, or 617.1508, Florida Statute poration organized under the laws of the State of FL office or registered agent, or both, in the State of Florida		•
	the corporation: SAH 99 F			
2. The principa	l office address: 18100 Vor	n Karman Avenue, Suite 500, Irvine, CA 92612		
3. The mailing	address (if different):			
4. Date of incor	poration/qualification: 08/	/21/1998 Document number: P9800007333	7	
	d street address of the curr rtment of State: (If resigne	ent registered agent and registered office on file with the d, enter resigned)		
	CT CORPORATION SY	STEM		
	1200 S. PINE ISLAND R	ROAD	19 A	
	PLANTATION, FL 3332/	the second secon	AUG 20	T1
6. The name and (if changed):		registered agent (if changed) and /or registered officहै।	0 PM 2: 23	; ED
	Corporation Service Con	mpany	ည	
	1201 Hays Street			
	Tallahassee	PO Box NOU acceptable FL 32301		
	1 divariassee			
The street address changed will	ess of its registered office be identical.	and the street address of the business office of its regis	tered	agent,
Such change wa authorized by the	as authorized by resolution he board, or the corporation	n duly adopted by its board of directors or by an officer on has been notified in writing of the change.	so	
	ise & COME are of an officer or director	Jill Cilmi, Vice President		
		Printed or typed name and title		
I further agree performance of agent. Or, if th hereby confirm	to comply with the provisi "my duties, and I am famil is document is beiny filed	tered agent and agree to act in this capacity. ions of all statutes relative to the proper and complete liar with and accept the obligation of my position as reg merely to reflect a change in the registered office addr heen notified in writing of this change.	gistere ess, 1	≥d
By: 1) 100 200	mature of Registed Agent	08/06/2019		
_	chalf of an entity:	Date		
u L	, Assistant Vice President			
-	yped or Printed Name	<del></del>		

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