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| (Re | equestor's Name) | | | |
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| (Ci | ty/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Ві | usiness Entity Nar | me) | | |
| (Document Number) | | | | |
| Certified Copies | Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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MAR 1 7 2016 I ALBRITTON



CSC - WILMINGTON

Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby grace.kirby@cscglobal.com

Date: March 10, 2016

Order#: 052820/014

Re: LEWIS PROPERTIES, 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:Grace Kirby c/o Corporation Service Company 2711 Centerville Road, Suite 400 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

| | · | 17.0502, 607.1508, or 617.1508, Floria organized under the laws of the State o | | |
|--|--|---|--|-----|
| | | registered agent, or both, in the State of | | |
| 1. The name of t | he corporation: LEWIS PROPERT | TIES, INC. | | |
| 2. The principal | office address: 220 SW 32nd Stre | et, Fort Lauderdale, FL 33335 | | |
| 3. The mailing a | ddress (if different): PO Box 2110 | 7, Ft. Lauderdale, FL 33335 | | |
| 4. Date of incorp | poration/qualification: 09/25/1998 | Document number: P9800 | 00083213 | |
| | street address of the current regist truent of State: (If resigned, enter r | tered agent and registered office on file resigned) | with the | |
| | NRAI Services, Inc. | | _ | |
| | 1200 South Pine Island Road | | | |
| | Plantation, FL 33324 | | _ | |
| 6. The name and (if changed): | street address of the new registere | ed agent (if changed) and /or registered | 2016 HAR | |
| | Corporation Service Company | ······································ | | 1 |
| | 1201 Hays Street | | | |
| | | lox NOT acceptable | , N | 3 |
| | Tallahassee | FL 32301 | _ 등 년 | |
| The street address changed will | ess of its registered office and the be identical. | street address of the business office of | f its registered agen | ıt, |
| Such change wa authorized by th | is authorized by resolution duly ac ne board, or the corporation has be | dopted by its board of directors or by a seen notified in writing of the change. | an officer so | |
| Sanda | o Lewis | Sandra Lewis, Secretary | | |
| Signatu | re of an officer or director | Printed or typed name and | title | |
| I further agree to performance of agent. Or, if the hereby confirm | to comply with the provisions of a mv duties, and I am familiar with | ent and agree to act in this capacity. Il statutes relative to the proper and c and accept the obligation of my posit to reflect a change in the registered of ified in writing of this change. | omplete ion as registered ffice address, I | |
| By: Drai | nature of Registered Agent | 03/10/2016 | | |
| Sig | nature of Registered Agent | Date | | |
| If signing on be | half of an entity: | | | |
| Grace E. Kirby, | Assistant Vice President | | | |
| T | yped or Printed Name | | | |

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (03/12)

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