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PICK-UP WAIT MAIL						
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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: Ashley Jiminez ashley.jiminez@cscglobal.com

Date: January 26, 2018

Order#: 040879/005

Re: BRICKELL CITY CENTRE PROJECT LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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:Ashley Jiminez 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 LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: BRICKELL C	ITY	CENTRE	PROJEC	CT LLC	
2.	(a)	98 SE 7th Street		(b)	98 SE	7th Street	
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_ (-,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Suite 601		_	Suite 60	1	
		Miami, FL 33131			Miami, F	L 33131	
		05/23/2012		_	L1200006		
3.		Date of filing/registration in Florida		4.		Document number	
5.	(a)	CHU, LINDA				_	
		Registered Agent and Registered Office shown on the records	of th	e Florida I	Dept. of State	e;	
		98 SE 7th Street				_	
		Registered Office Address (MUST BE FLORIDA STREE	TAI	DDRESS)		-4. ~ <u>a</u>	
		Suite 601				温昌 市	
		Miami	FL_	33131		TILLAHASSS	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Register	red C	Mice addr	'e <u>ss</u> :	TO D	
		1201 Hays Street	-	_		FOR OH	
		NEW Registered Office Address:		<u>.</u>		- y	
						_	
		<u>Tallahassee</u>	FL_	32301		_	
the age	If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.						
	ional	ure of a member or authorized representative of a member		LIND	A CHU	Authorized Person Printed or typed name of signee	
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 obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Signature of Registered Agent Corporation Service Company By: Grace E. Kirby, Asst. Vice President							

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 FILING FEE: \$25.00