## M1300000 2746

(Re	equestor's Name)								
(Ac	ldress)								
(Ac	ldress)	<del></del>							
(City/State/Zip/Phone #)									
PICK-UP	☐ WAIT	MAIL							
(Bi	isiness Entity Nam	ne)							
(Document Number)									
Certified Copies	_ Certificates	of Status							
Special Instructions to	Filing Officer:								

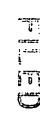
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: February 22, 2019

Order#: 642029-020

Re: MARTIN BRUDNIZKI DESIGN STUDIO LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 ...

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA.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.

(a)	227 West 29th Street, 13th Floor	(t	o)				
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ `	,——	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	New York, NY 10001	_					
	05/01/2013	_	M1300	00002746			
	Date of filing/registration in Florida	4.		Documen	t number		
(a)	C T Corporation System						
(-)	Registered Agent and Registered Office shown on the records of			State:			
	1200 South Pine Island Road						
	Registered Office Address (MUST BE FLORIDA STREET.	ADDRESS	<u> </u>				
	Plantation , FL	. 33324	1	_ <del></del>	SECT	2019 FEB	
(b) .	Corporation Service Company				<u></u> i	65	
	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	<del></del>	37-	26	Ĺ
					, , , , , ,	РН	
	1201 Hays Street				Fig.	- <u>-</u> -	
	NEW Registered Office Address:					: 52	<del></del> -
	Tellaharana	00004					
	Tallahassee , FL	, 32301					
cha ent w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia- ter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reginability confirmation of the limited in the	stered of ompany, lited liab	fice and the bi it is hereby co ility company	usiness of: infirmed t	fice of hat the	the registe change(s)
	/s/ Jill Cilmi	Jill	Jill Cilmi, Authorized Person				
ignat	ure of a member or authorized representative of a member			Printed or t	yped name o	f signee	
ovisi obli mere	by accept the appointment as registered agent and agrons of all statules relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I it is writing of this change.	ee to act perform d for in ( hereby co	in this c ance of n Chapter ( onfirm th	capacity. I fur ny duties, and 605, F.S. Or, nat the limited	ther agree I am fami if this doc liability c	to con liar wi ument ompan	nply with t th and acc is being fit y has heer