M100005197

(Re	questor's Name)		
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone#j)	
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(Bu	siness Entity Name)	<u> </u>	
(Document Number)			
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

 A_{i}^{*}

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper acasper5@cscinfo.com

Date: December 3, 2013

Order#: 906092-001

Re: 1625 MONTEVERDE, 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 2711 Centerville Road, Suite 400

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.

QUCA.XCOA

2013 DEC -5 AM IO: 26

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. Nan	ne of the limited liability company: 1625 MONTEVE	RDE, LLC	E ET 1 . =	
2 (a)	Principal office address of limited liability company	v clo Delma Properties Inc		
2. (a)	(Note: MUST BE STREET ADDRESS)	80 Maiden Lane, Suite 2205		
		New York	NY 10038	
(b)	Mailing address of limited liability company:	c/o Delma Properties, Inc.		
(Note: MAY BE POST OFFICE BOX)		80 Maiden Lane, Suite 2205		
		New York, NY 10038		
11/24/2	2010	M10000005197		
3. Date	e of filing/registration in Florida	4. Document number		
5. (a)	Registered Agent and Registered Office shown on	the records of the Florida Do	ept, of State:	
	Registered Agent:	C T Corporation System	7	
	Registered Argent.		子作 D	
	Registered Office Address:	1200 S. Pine Island Road	P3 1	
		Plantation	FL 33324-	
		r iditidion	-17 -17 10°	
(b)	Enter name of NEW Registered Agent and/or NE	W Registered Office addre	ss: 四型 No	
	NEW Registered Agent:	Corporation Service Compa	· ·	
NEW Registered Office Address:		1201 Hays Street		
	(MUST BE FLORIDA STREET ADDRESS)	Tallahassee	,FL 32301	
confirm and the liability the men	imited liability company is not organized under the med that after the change or changes are made, the Fe business office of the registered agent will be idently company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwiterating agreement of the limited liability company.	lorida street address of the r ical. Or, in the case of a Flo was/were authorized by an	egistered office orida limited affirmative vote o	
/s/ Don	a Priebe			
Signature	of a member or authorized representative of a member	_		
Dona P	Priebe, Authorized Person			
	or typed name of signee	_		
I herei comply and I a Chapte address By:	by accept the appointment as registered agent and a with the provisions of all statules relative to the prim familiar with and accept the obligations of my point 608, F.S. Or, if this document is being filed to me s, a hereby confirm that the limited liability compan	gree to act in this capacity. Oper and complete performo sition as registered agent a rely reflect a change in the y has been notified in writin	I further agree to ince of my duties, s provided for in registered office g of this change.	
Signatur	e of Registered Agent Corporation Service Company	Sylvia Quennet Accietant	Vice President	

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