108000037077

(Requestor's Name) (Address)				
(City/State/Zip/Phone #)				
(Oity/State/Zip/r Hone #)				
PICK-UP WAIT MAIL				
(Paris on Eskin Nome)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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12/05/18--01016--015 **25.00

D. SCOTT DEC 11 2018



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.sariaslani@cscglobal.com

Date: December 3, 2018

Order#: 489834/005

Re: 1200 WEST AVENUE LESSEE, 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 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 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. 1	Name of the limited liability company: 1200 WEST AV	ENUE LE	SSEE, LLC
2. (a	475 Tenth Avenue	(b)	475 Tenth Avenue
·	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 10018		New York, NY 10018
	0.4/4.1/2009		L.08000037077
3.	04/11/2008 Date of filing/registration in Florida	- 	Document number
	0.T.00DD00.TION.0V0TEM		
5. (a)	Registered Agent and Registered Office shown on the records of t	he Florida I	Dent of State:
	•	ine i terion i	or mile.
	1200 SOUTH PINE ISLAND ROAD	4 ft 45 45 47 67 67 1	
	Registered Office Address (MUST BE FLORIDA STREET A	<u>(DDKESS)</u>	
	PLANTATION , FL	33324	
(b)			
) Corporation Service Company		
	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	ess:
	1201 Hays Street		
	NEW Registered Office Address:		
			1-1-1-1
	Tallahassee FI.	32301	
	.11,	02001	
	limited liability company is not organized under the law range or changes are made, the Florida street address of		
agent	will be identical. Or, in the case of a Florida limited lia	ability con	ipany, it is hereby confirmed that the change(s)
	vere authorized by an affirmative vote of the members o ticles of figanization or the operating agreement of the		
tiic ai			, ,
Sign	nature of a premper or authorized representative of a member	JIII CI	Imi, Authorized Person Printed or typed name of signee
I her provi the o	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete bligations of my position as registered agent as provided rely reflect a change in the registered office address. It is ed in writing of this change.	ee to act i performa I for in Ch ierehy coi	n this capacity. I further agree to comply with the
	ture of Registered Agent Corporation Service Company		
Signa	ture of Registered Agent Corporation Service Company	BY: Gra	ice E. Kirby, Assistant Vice President