The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.					
SIGNATURE	: JANICE NULL			04/26/2016	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGRM	Title	MGRM		
Name	PLAPINGER, SCOTT	Name	PLAPINGER, BRUCE		
Address	2495 US HIGHWAY ONE	Address	560 PEOPLES PLAZA, PMB 142	2	
City-State-Zip:	LAWRENCEVILLE NJ 08648	City-State-Zip:	NEWARK DE 19702		
Title	MGRM				
Name	PLATT, LAWRENCE				
Address	265 FREEMAN PKWY				

**6 COLONIAL LAKE DRIVE** SUITE A LAWRENCEVILLE, NJ 08648 US

## FEI Number: 20-5177313

## Name and Address of Current Registered Agent:

INCORP SERVICES, INC. 17888 67TH COURT NORTH LOXAHATCHEE, FL 33470 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SCOTT	PI APINGER
SIGNATORE. SCOTT	

City-State-Zip: PROVIDENCE RI 02906

Electronic Signature of Signing Authorized Person(s) Detail

MGRM

04/26/2016 Date

FILED Apr 26, 2016 Secretary of State CC7470117663

Certificate of Status Desired: No

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000043966

Entity Name: NORTHWAY PLAZA, LLC

## **Current Principal Place of Business:**

2495 US HIGHWAY ONE LAWRENCEVILLE. NJ 08648

**Current Mailing Address:**