B01000000432

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CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO	: I200	000000195	
REFERENC	E : 310;	75783	36
AUTHORIZATIO		us de man	<u>ر</u>
COST LIMI	: \$/3!	5000	
ORDER DATE : February 7, 20	24		·
ORDER TIME : 2:03 PM			
ORDER NO. : 310376-040			
CUSTOMER NO: 7578386			
<u>CHANGE OF</u>	AGENT		
			
NAME: NEWKIRK WAL	NDO LP		
PLEASE RETURN THE FOLLOWING	S PROOF (OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY			
CONTACT PERSON: Alexxis Wei	and-sorer	ıson	
;	XAMINER'S	S INITIALS:	

COVER LETTER

TO: Registration Section Division of Corporations	
•	
SUBJECT: Newkirk Walando L.P.	
	rtnership or Limited Liability Limited Partnership
DOCUMENT NUMBER: B0100000	00432
The enclosed Statement of Change o fee(s) are submitted for filing.	f Registered Office and/or Registered Agent and
Please return all correspondence cond	cerning this matter to:
Maria Roman	
Contact Person	
LXP Manager Corp.	
Firm/Company	
One Penn Plaza, Suite 4015	
Address	
New York, NY 10119	
City, State and Zip Co	ode
mroman@lxp.com	
E-mail address: (to be used for future a	innual report notification)
For further information concerning th	nis matter, please call:
Maria Roman	at (212) 692-7238
Name of Contact Person	Area Code and Daytime Telephone Number
Enclosed is a \$35.00 check made pay	able to the Florida Department of State.
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115. Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

Corporation Service Company Name 1201 Hays Street Address Tallahassee, FL 32301 City, State and Zip The name and Florida street address of the new registered agent and/or office: Beth Boulerice Name 515 N. Flagler Drive, Suite 4018 Florida street address (P.O. Box not acceptable) West Palm Beach FL 33401 City, State and Zip Sach change(s) is/are effective when filed by the Florida Department of State. By New Inchesion of City P, many gnature of General Partner By New Inchesion of City P, many pharmacy accept the appointment as registered agent and agree to act in this capacity. I further agree	i	Name of Limited Partnership or Limited Liability Limited Partners	hip
Date of filling/registration in Florida Florida document number The name of the registered agent and the registered office address as shown on the records of the Florida epartment of State: Corporation Service Company	12/14/2001	3. B01000000432	
Corporation Service Company Name 1201 Hays Street Address Tallahassee, FL 32301 City, State and Zip The name and Florida street address of the new registered agent and/or office: Beth Boulerice Name 515 N. Flagler Drive, Suite 4018 Florida street address (P.O. Box not acceptable) West Palm Beach FL 33401 City, State and Zip Sach change(s) is/are effective when filed by the Florida Department of State. By New Archive Ward of Florida State was larged to get in this capacity. I further agree	Date of fill		nent number
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uties, and I am familiary the an accept the obligations of my position as registered agent.	hereby accept the comply with the	appointment as registered agent and agree to act in this capacity provisions of all statutes relative to the proper and complete per	v. I further agree erformance of my

Certified Copy (optional): \$52.50