## B11000000116

(Requestor's Name)					
(Address)					
(Address)					
(C	ity/State/Zip/Phone #	()			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					

Office Use Only



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K.SALY EXAMINER JUL 19



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: July 14, 2016

Order#: 193523-042

Re: SHELBOURNE TOWERS, LP

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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: Mary Rivers

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

## 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.

1	SHELBOURNE To			in		
2. 06/06/2011  Date of filing/registration in Florida		2	B11000000116 Florida document number			
<u> </u>	gistered agent and the registered offic					
	Field, Rob	ert				
	241 Bradley I	Place				
	Address Palm Beach	FL	33480	~		
	City, State and			April 18		
5. The name and Flori	ida street address of the new registere	-	r office:	2016 JUL 18 PK 12: 48		
	Corporation Service	e Company	<u>/</u>			
	Name					
1201 Hays Street						
Florida street address (P.O. Box not acceptable)						
	Tallahassee	FL_	32301			
City, State and Zip						
Sie e ac	re effective when filed by the Florida					
	Partner Jill Cilmi, Vice President on be					
comply with the provis and I am familiar with Corporation	pointment as registered agent and as sions of all statutes relative to the properties of my posion Service Company	per and comp	olete performa	I further agree to nce of my duties,		
Signature of Registere	u Agent					
Filing Fee: Certified Copy (o	\$35.00 eptional): \$52.50					