## F0500003448

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ALLAHASSEE FLOW

2022 JUN 20 AM 9: 52

f 6/21/2022

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500				
ACCOUNT NO. : I2000000195				
REFERENCE : 731050 4332382  AUTHORIZATION : Spelle Man				
COST LIMIT : \$ 35.00				
ORDER DATE : June 8, 2022				
ORDER TIME : 9:58 AM				
ORDER NO. : 731050-033				
CUSTOMER NO: 4332382				
CHANGE OF AGENT				
NAME: TRUMP LAS OLAS MEMBER CORP.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0302, 617 inge is submitted for a corporation o	rganized under the laws of the State	e of DE
<del></del>	r to change its registered office or re	U U	e of Florida.
1. The name of	the corporation: TRUMP LAS OLAS	MEMBER CORP.	<del> </del>
2. The principal	office address: C/O MAR-A-LAGO C	CLUB 1100 S. OCEAN BLVD., PA	ALM BEACH, FL 33480
3. The mailing a	address (if different): c/o The Trump O	organization 725 FIFTH AVENUE, NEV	W YORK, NY 10022
	poration/qualification: 06/13/2005		
5. The name and	d street address of the current register timent of State: (If resigned, enter res	red agent and registered office on fi	
	NRAI SERVICES, INC		
	1200 South Pine Island Road		
	Plantation, FL 33324		2022 * i j
6. The name and (if changed):	I street address of the new registered	agent (if changed) and /or registere	2022 JUN 20
	Corporation Service Company		
	1201 Hays Street		9:5
	P.O	O. Box NOT acceptable	7 2
	Tallahassee	FL 32301	<del></del>
The street address changed will	ess of its registered office and the st be identical.	reet address of the business office	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly add ne board, or the corporation has bee	opted by its board of directors or b in notified in writing of the change	y an officer so
	Sie E. Cienie	Jill Cilmi, Vice President	
Signature of in officer or director		Printed or typed name	
i juriner agree i of my duties, an document is bei corporation has	the appointment as registered agent to comply with the provisions of all d I am familiar with and accept the ng filed merely to reflect a change to been notified in writing of this change to Service Company	nt and agree to act in this capacity statutes relative to the proper and obligation of my position as regis in the registered office address, I I mge.	t l complete performance stered agent. Or, if this hereby confirm that the
	ace t-Kubly	06/15/2022	
Sign	nature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President		
T)	sped or Printed Name		
	* * * FILING	G FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)