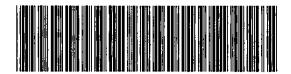
F100000002-3-59

/Da	equestor's Name)	
(Re	:questoi s Name)	
(Ad	ldress)	
(Ad	ldress)	
•		
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
_	_	
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies Certificates of Status		s of Status
Special Instructions to	Filing Officer:	
!		
	•••	





800270387048

03/10/15--01026--008 **35.00

SEURETARY OF STATE ALLAHASSEE, FLORID

MAR 15 2015 T. BERNIEUK



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: March 3, 2015

Order#: 498842-187

Re: FOREST CITY COMMERCIAL MANAGEMENT, INC.

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: Lindsey Lockard

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

SȚATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corporation orga	02, 607.1508, or 617.1508, Florida Statutes inized under the laws of the State of OH tered agent, or both, in the State of Florida.			
1. The name of	the corporation: FOREST CITY COMMI	ERCIAL MANAGEMENT, INC.			
2. The principal	l office address:SQUARE, SUITE 1360, CLEVELAND (_
3. The mailing	address (if different):				_
4. Date of incor	rporation/qualification: 05/13/2010	Document number: F10000002259			_
	d street address of the current registered artment of State: (If resigned, enter resign	agent and registered office on file with the ned)			
	C T CORPORATION SYSTEM		1		
	1200 SOUTH PINE ISLAND ROAD		ALL/	15 H	
	PLANTATION	FL 33324	AHAS	MAR 10	-
6. The name an (if changed):		ent (if changed) and /or registered office	RY OF STATE SEE, FLORID) PH 3: I	İ
	Corporation Service Company 1201 Hays Street		IDA 3		
	P.O. Box NC	l'I acceptable			
	Tallahassee	FL 32301			
The street addr as changed wil	ress of its registered office and the stree I be identical.	t address of the business office of its regist	ered agen	ıt,	
Such change wauthorized by t	vas authorized by resolution duly adopte the board, or the corporation has been n	ed by its board of directors or by an officer offied in writing of the change.	so		
		Dona Priebe, Vice President			
I hereby accep I further agree performance of agent. Or, if the hereby confirm	f my duties, and I am familiar with and	itutes relative to the proper and complete accept the obligation of my position as reg flect a change in the registered office addr	gistered ess, I		
	gnature of Registered Agent	Date			
If signing on be	ehalf of an entity:				
Grace E. Kirby	v, Asst. Vice President	·			

* * * FILING FEE: \$35.00 * * *

Typed or Printed Name