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Account#: 120000000088

Date:	3/28/2018	Account#, 12000000000
Name:	Chris Vick	-
Reference #	C021704	
Entity Name:	CSFL RETAIL	ASSOCIATES, L.L.C.
Articles o	f Incorporation/Author	zation to Transact Business
Amendme	ent	
✓ Change of	of Agent	
Reinstate	ment	
Conversion	on	
Merger		
Dissolution	on/Withdrawal	
Fictitous I	Name	
Other		

Authorized Amount: Signature:

\$15,00

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COGENCY GLOBAL (HK) LIMITED ABONG KONGLI MITED COMPANY INFINITUS PLAZA, 17 - 51 199 DES VOEUX RO CENTRAL HONG KONG 4852,3975,1803



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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

oom, in the blate of I fortua.			
1. Name of the limited liability company: CSFL RET	AIL ASSOCIATES, L.	L.C.	
2. (a) Principal office address of limited liability compa	ny: 1765 MERRIMAN RD.		
(Note: MUST BE STREET ADDRESS)	AKRON, OH 44313		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1765 MERRIMAN RD.		
(Note: MAT BE POST OFFICE BOX)	AKRON, OH 44313		
September 18, 2000	L00000011225		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida	a Dept. of State:	
Registered Agent:	CT Corporation Sys	stema _e ,	
Registered Office Address:	1200 South Pine Island Ro		
•	Plantation, FL 33324	S 2 N	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>		— — — — — — — — — — — — — — — — — — — 	
NEW Registered Agent:	COGENCY GLOBAL	INCE	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	115 North Calhoun St		
	Tallahassee	,FL_32301	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company	Florida street address of the entical. Or, in the case of a (s) was/were authorized by wise provided in the article	he registered office a Florida limited van affirmative vote of	
/s/ Alan Sponseller			
Signature of a member or authorized representative of a member			
Alan Sponseller Printed or typed name of signee			
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 605, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compositions of the state of the sta	d agree to act in this capac proper and complete perfo position as registered age merely reflect a change in any has been notified in wi	city. I further agree to rmance of my duties, of as provided for in the registered office riting of this change.	

Signature of Registered Agent Sean Honan , Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00