103 000 000257

(Requestor's Name)					
(Address)					
(Address)	_				
(City/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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O SIMMONS FEB 24 2020



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: January 29, 2020

Order#: 148234/069

Re: PS DEERFIELD BEACH, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX _ Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.
XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

١.	Na	me of the limited liability company: PS DEERFIE	LD BEACH, LL	<u> </u>
2	(2)	701 Western Avenue	(b)	
٠.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Glendale, CA 91201		
		01/03/2003	LO	3000000257
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	C T Corporation System Registered Agent and Registered Office shown on the records	of the Marida Dani	t of Status
		Registered Agent and Registered Office shown on the records	or the Florida Dep	i, of state.
		1200 South Pine Island Road		
		Registered Office Address (MUST BE FLORIDA STREE	<u>T ADDRESS)</u>	
		Plantation	Cr 22204	2020 JAN 30
		Plantation	FL <u>33324</u>	- JAI
	71.5	Corporation Service Company		Cu com
	(b)	Enter name of NEW Registered Agent and/or NEW Register	ed Office address	
				二 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三 三
		1201 Hays Street		AH 7: 35
		NEW Registered Office Address:		<u> </u>
				.,
		Tallahassee	FL <u>32301</u>	
the ag	e cha ent v as/we	mited liability company is not organized under the nge or changes are made, the Florida street address vill be identical. Or, in the case of a Florida limited at the authorized by an affirmative vote of the member cles of organization or the operating agreement of the street cles.	of the registere liability compa s of the limited	d office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in
		ill Cilmi	Jill Cilmi	, Authorized Person
	Signa	ure of a member or authorized representative of a member		Printed or typed name of signee
pr the to	ovisi e obl mere	by accept the appointment as registered agent and a cons of all statutes relative to the proper and completigations of my position as registered agent as proview reflect a change in the registered office address. I'm writing of this change.	ite performance ded for in Char	of my duties, and I am familiar with and accept oter 605, F.S. Or, if this document is being filed
Si	gnatu	re of Registered Agent Corporation Service Company	y BY: Ami l	M. Casper, Asst. Vice President

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