L0300035827

| (Requestor's Name) |
|---|
| |
| (Address) |
| |
| (Address) |
| (//00/035) |
| |
| (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 |
| |



| ALLAHASSEE, FLUE | 2022 JUN 20 AM (1 = 38) | RECEIVED |
|------------------|-------------------------|----------|
| | 2022 JUH 20 AH H : 35 | 6 6 |
| , F | й II : 3 5 | |

fulailauza

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

• •

| ACCOUNT NO. | : 12000000195 |
|---------------|-------------------|
| REFERENCE | : 731050; 4332382 |
| AUTHORIZATION | Sput de man |
| COST LIMIT | : \$ 25.00 |
| | |

- ORDER DATE : June 8, 2022
- ORDER TIME : 9:58 AM
- ORDER NO. : 731050-037
- CUSTOMER NO: 4332382

CHANGE OF AGENT

NAME: TRUMP LAUDERDALE DEVELOPMENT LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Alexxis Weiland -- EXT#

EXAMINER:

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.

| 1. N | ame of the limited liability company: | ERDAI | | EVELOPM | ENT LLC | | | <u> </u> |
|---|--|---|--|---|---|--|------------------------------|--------------------------------|
| 2. (a) | C/O MAR-A-LAGO CLUB | | (b) | C/O THE 1 | | RPORATIC | N | |
| 2. (u) | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | | ailing address of (Note: MAY E | | | |
| | 1100 S. OCEAN BLVD. | | | 725 FIFTH | AVENUE | | | |
| | PALM BEACH, FL 33480 | | | NEW YOR | K. NY 10022 | 2 | | |
| | 09/19/2003 | | I | .030000358 | 327 | | | |
| 3. | Date of filing/registration in Florida | 4. | - | C | Document nu | ımber | | |
| 5. (a) | NRAI SERVICES, INC | | | | | | | |
| 5. (u) | Registered Agent and Registered Office shown on the records of | f the Flo | orida | Dept. of State: | | | | |
| | 1200 SOUTH PINE ISLAND ROAD | | | | | | | |
| | Registered Office Address (MUST BE FLORIDA STREET ADDRESS) | | | | | | 2(| |
| | | | | | | |)22. | |
| | PLANTATION, F | L_3332 | 24 | | | <u>'</u> | 022 JUH 20 | - B |
| | | | | | | | | |
| (b) | Enter name of NEW Registered Agent and/or NEW Registere | d Office | e add | ress: | | | AM 11: 31 | ز ا |
| | | | | | | | پي | - |
| | Corporation Service Company | | | | | F 1 | б | |
| | NEW Registered Office Address: | | | | | | | |
| | 1201 Hays Street | | | | | | | |
| | Tallahassee | L |)1 | | | | | |
| change agent v was/we the arti | imited liability company is not organized under the late or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited 1 ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the \underline{X} \underline{L} \underline{C} \underline{O} \underline{W} ture of a member or juthorized representative of a member by accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete | e regist iability of the e limite J | tered cor limi ed lia Jill C | l office and pany, it is l ted liability ability comp ilmi, Authori n this capac | the business hereby confin company or bany. ized Person Printed or typed situal Lingthese | office of t rmed that i as otherwi | he reg the cha ise pro | istered ange(s) vided in |
| the obl to mer notifie | ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address. I d'in writing of this change. | ed för i hereby | n Cl v cor | aptèr 605, 1 firm that th | F.S. Or, if th e limited liab | his docume hility comp | ent is b pany h | eing filed as been |
| | Drace C-Kuby | | | | | | | |

Signature of Registered Agent

Grace E. Kirby, Asst. Vice President of Corporation Service Company

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