## 107000120430

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(Address)				
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PICK-UP WAIT MAIL				
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DEC 0.1.2018

I ALBRITTON



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: November 16, 2018

Order#: 492275/005

Re: AEJ NORMANDY 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.

1. N	ame of the limited liability company: AEJ NORMAN	IDY LLC	
2. (a)	c/o Juster Development Co.	(b)	
- (-)	Principal office address of limited liability company:		Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
	120 White Plains Road, Suite 110		
	Tarrytown, NY 10591	<del></del>	
	12/04/2007	L07	000120430
3.	Date of filing/registration in Florida	4.	Document number
5. (a	NRAI Services, Inc		
J. (a)	Registered Agent and Registered Office shown on the records o	f the Florida Dept.	of State:
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	A		
	Plantation F	L <u>33324</u>	<u></u>
(b)			FIL 2018 110V 110 SEP SEP SE
	Enter name of NEW Registered Agent and/or NEW Registere	d Office address:	2
			ED #19:82
	1201 Hays Street		<u> </u>
	NEW Registered Office Address:		72·
	· · · · · · · · · · · · · · · · · · ·		<del></del>
	Tallahassee , F	L32301	
the ch agent was/w	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited la ere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered iability compan of the limited li	office and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
/s/	Gary Juster	Gary Just	er, Authorized Person
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob to mei	eby accept the appointment as registered agent and ag ions of all statutes relative to the proper and complete digations of my position as registered agent as provide selv reflect a change in the registered office address, I ad in writing of this change.	gree to act in thi e performance o ed for in Chapte hereby confirm	s capacity. I further agree to comply with the of my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed that the limited liability company has been
Signat	ure of Registered Agent Corporation Service Company	BY: Ami M	. Casper, Asst. Vice President

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