4000132232

(Requestor's Name)						
(Address)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
(Execument Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
Special instructions to riling Officer.						

Office Use Only



500319190255

10/05/18--01001--012 **25.00

OCT 2 0 2018 S. YOUNG 8 OCT -5 PM 5: 27 ECRETANY OF STATE RLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration Section Division of Corporations						
SUBJ	ECT: CENTRAL PARK FUND, LLC			iobilio.	Communi		
	Nan	ne of L	imited 1.	лаонцу (Company		
Dear	Sir or Madam:						
The e	nclosed Registered Agent/Registered Off	īce Ch	ange and	l fee(s) a	are submitted for filing	g.	
Please	e return all correspondence concerning th	is mat	ter to the	followi	ng:		
Ani	ril Adamkovich						
	Name of Person		12 - 1-				
Vco	rp Services	_					
	Firm/Company					18 18	
25 R	tobert Pitt Drive, Suite 204					AH OCT	T
	Address					CT -5 PM	į.
						## _€ = [7.
Mon	isev, NY 10952 City/State and Zip Code					PN 5: 27	
	Only out and improve					27 (IDA	
til	ings@vcorpservices.com		-				
	E-mail address: (to be used for future and	nual re	port noti	neation))		
For fi	urther information concerning this matter	, pleas	e call:				
٨	pril Adamkovich	at ((_845_)	425-0077		
	Name of Person			Area	Code & Daytime Tel	ephone Number	
	STREET/COURIER ADDRESS: Registration Section				G ADDRESS: on Section		
	Division of Corporations Division of Corporations						
	Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314						
	Tallahassee, Florida 32301						
	Enclosed is a check for the following	g amoi	unt:				
	☑ \$25 Filing Fee		<u> </u>	555 Filin	g Fee & Certified Co	ру	

INHS18 (2/14)

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	Same of the limited liability company: CENTRAL F	PARK FUND, L	LC
2 (a)	Central Park Fund LLC	(h) Cer	itral Park Fund LLC
2 . (a.	Principal office address of limited liability company:	(0)	Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
	141 Fifth Avenue #9AB	141 [Fifth Avenue #9AB
	New York, NY 10010	New	York, NY 10010
	12/29/2010	L100	000132232
3.	Date of filing/registration in Florida	4.	Document number
5. (a	, WAKSMAN, SERGIO J		
J. (Registered Agent and Registered Office shown on the records of	of the Florida Dept. o	f State:
	4306 KNIGHTS AVENUE		
	Registered Office Address (MUST BE FLORIDA STREET)	<u>('ADDRESS)</u>	
			<u> </u>
	TAMPA F	<u>33611</u>	00 F
(b)	Vcorp Services, LLC		TIEED T-S PE ASSEE, F
`	Enter name of NEW Registered Agent and/or NEW Registered		
	5011 South State Road 7, Suite 106	. OS → C	
	NEW Registered Office Address:		27 IDA
	Davie , F	1. <u>33314</u>	
the chagent was/v the ar	limited liability company is not organized under the lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered of liability company s of the limited lia	office and the business office of the registered to it is hereby confirmed that the change(s) ability company or as otherwise provided in company.
Sign	latify of a member of authorized representative of a member		Printed or typed name of signee
provi the oi to me notifi	eby accept the appointment as registered agent and as sions of all statutes relative to the proper and complet bligations of my position as registered agent as providingly reflect a change in the registered office address, led its writing of this change.	gree to act in this te performance of led for in Chapter I hereby confirm	capacity. I further agree to comply with the I 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
Signa	fire of Registered Agent		