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H220002143143ABCT

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:	

LLC REGISTERED AGENT CHANGE 110 ALPINE LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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COVER LETTER

TO:	FO: Registration Section Division of Corporations						
SUBJE	ter: 110 ALPINE LLC						
00202	Name	of Limited Liability Company					
Dear Si	ir or Madam:						
The en	closed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.					
Please	return all correspondence concerning this	matter to the following:					
Jos	shua Murphy						
	Name of Person						
Regis	stered Agent Solutions, Inc.						
	Firm/Company						
Corpe	orate Center One, 5301 Southwest	Pkwy, Ste 400					
	Address						
Austi	n, TX 78735						
	City/State and Zip Code						
<u>-</u>	E-mail address: (to be used for future annu	ual report notification)					
For fu	rther information concerning this matter.	please call:					
Jos	shua Murphy	888 705-7274					
	Name of Person	Area Code & Daytime Telephone Number					
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
	Enclosed is a check for the following	amount:					
	□ \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy					
INHS	18 (2/14)						

15129570210

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.

l. Na	me of the limited liability company: 110 ALPI			 		
	16 ALPINE ROAD	(b) 16 ALPINE ROAD				
<u>. (4)</u>	Principal office address of limited liability company:	· · · · · · · · · · · · · · · · · · ·	Mailing address of limited liability company. (Note: MAY BE POST OFFICE BOX)			
	NEW ROCHELLE, NY 10804-3502	NEW !	ROCHELLE, NY			
	8/16/2011	 L1100	0094124	<u> </u>		
3.	Date of filing/registration in Florida	4.	Document number			
	BLUMBERGEXCELSIOR CORPORATE S	ERVICES, INC.				
5. (a)	Registered Agent and Registered Office shown on the records of 155 OFFICE PLAZA DRIVE, 1ST FL Registered Office Address (MUST BE FLORIDA STREE	OOR	ate:			
		_{1.} 32301	-			
(b)	Registered Agent Solutions, Inc.			3 }		
(0)	Enter name of NEW Registered Agent and/or NEW Register		 :			
	155 Office Plaza Dr.		· <u>·</u>	(Q)		
	NEW Registered Office Address:			(구) <u>프</u>	4 Mary 14	
	Suite A				·- •	
	Tallahassee	_{FL} 32301		1.04		

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Francesca Papadopoulos

Francesca Papadopoulos Manager

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Mackenzie Hart, Asst. Secretary

Signature of Registered Agent