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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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LLC REGISTERED AGENT CHANGE 5TH AVE DELRAY LLC

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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.

(-)	3811 Turtle Creek Blvd. Stc. 975, Dallas, TX 75219	(b) 381	(b) 3811 Turtle Creek Blvd. Stc. 975, Dallas, TX 75219	
(a) _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
<i>(</i> -)	Date of filing/registration in Florida	4.	Document number	
(a)	Registered Agent and Registered Office shown on the records o	f the Florida Dept	t. of State:	
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
		 	·	
	, F	l	<u> </u>	
	C T Corporation System		•	
(p)	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address:	 ;	
		,	.	
			•	
	NEW Registered Office Address:			
	1200 South Pine Island Road			
	Plantation , F	L_33324	·	
ie cha gent w as/wo	imited liability company is not organized under the lange or changes are made, the Florida street address of the identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the registered liability compa- of the limited	d office and the husiness office of the registere my, it is hereby confirmed that the change(s) liability company or as otherwise provided in	
	willy fell		Timothy J. Sullivan	
	ture of a member or authorized representative of a member		Printed or typed name of signee	
			the state of the s	
herel rovisi ne obli nere	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address, if I in writing of this change.	gree to act in ti e performance led for in Chap I hereby canfir	nts capacity. I further agree to comply with the of my duties, and I am familiar with and accepter 605. F.S. Or, if this document is being filed in that the limited liability company has been	