43000031796

(Requestor's Name)					
(Address)					
(Address)					
(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



700327960577

04/19/19--01022--022 **25.00

19 APR 19 PH 2: 27
SEUSEJARY OF STATE

APR 26 2019 T SCHROEDER



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: April 17, 2019

Order#: 693060/006

Re: METROPOLITAN INVESTMENT TRUST, 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:Anthony Arthur 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.	Na	me of the limited liability company: METROPOLITAN	INVES	STMENT TRUST, LLC	
2.	(a)	150 SE 2nd Avenue	_ (b)	b)150 SE 2nd Avenue	
		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)	-
		SUITE 300		SUITE 300	
		Miami, FL 33131	_	Miami, FL 33131	
		03/01/2013	_	L13000031796	
<u>.</u> ڌ		Date of filing/registration in Florida	4.	Document number	
5.	(a)	ALEXANDER, DAVID S			
	• ,	Registered Agent and Registered Office shown on the records of th	e Florida l	la Dept. of State:	
		150 SE 2nd Avenue, Suite 300			
		Registered Office Address (MUST BE FLORIDA STREET AL	ODRESS)		
		Miami FL_	33131		
	(b)	Corporation Service Company			
	, ,	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	ffice add	ddress:	
		1201 Hays Street			
		NEW Registered Office Address:			
		Tallahassee	32301	1	
the ag	e char ent w is/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liab	he regist pility cou the limi	istered office and the business office of the reg- ompany, it is hereby confirmed that the change nited liability company or as otherwise provide	istered (s)
		Xie E. Coni	Jill C	Cilmi, Authorized Person	
	Signat	ure of a member or authorized representative of a member		Printed or typed name of signee	
pr the to no	ovisie e obli mere tifiea	oy accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address, I he in writing of this change. Mare a Corporation Service Company	erforma for in Ci creby coi	nance of my duties, and I am familiar with and Chapter 605, F.S. Or, if this document is being confirm that the limited liability company has b	th the accept z filed een
. 11	Enaita	Corporation Service Company	DI, UE	Grace E. Kirby, Assistant Vice President	

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