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Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE CN THREE, 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.

1.	Na	ame of the limited liability company: CN Three, LLC				
2. (a)	525 SOUTH FLAGLER DRIVE		(h)	(b) 525 SOUTH FLAGLER DRIVE	
	,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(17)	Mailing address of limited liability comp (Note: MAY BE POST OFFICE BO.	
		SUITE 201			SUITE 201	
		WEST PALM BEACH, FL 33401	_		WEST PALM BEACH, FL 33401	
		12/26/2013		L	L13000177055	
3.		Date of filing/registration in Florida	4,	_	Document number	
5.	(a)	Ward, Nathan				
υ, (α)	(4)	Registered Agent and Registered Office shown on the records of the	he Flo:	rida I	la Dept, of State:	
		525 S Fiagler Dr			2023	
		Registered Office Address (MUST BE FLORIDA STREET A suite 20)	DDRE	<u> </u>	<u>`</u>	_
		West Palm Beach, FL_	33401		ddress:	-
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u> Corporate Creations Network Inc.	Office	<u>addr</u>	ddress:	
		NEW Registered Office Address:				
		801 US Highway I				
		North Palm Beach , FL_	33408	;	······································	
char aget was/	ige it w wei	mited liability company is not organized under the laws or changes are made, the Florida street address of the r fill be identical. Or, in the case of a Florida limited liab re authorized by an affirmative vote of the members of thes of organization or the operating agreement of the li	egiste pility the li	ered com imit	ed office and the business office of the register company, it is hereby confirmed that the change nited liability company or as otherwise provide	red e(s)
		- A	A	rians	ала Turoski, Attorney-in-fact	
Sig	matu	are of a member or authorized representative of a member			Printed or typed name of signee	
orov the c	ışıçı bliy erei	y accept the appointment as registered agent and agree ins 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,	e to a erfori for in ereby	ict ir man i Chi con,	t in this capacity. I further agree to comply wi ance of my duties, and I am familiar with and Chapter 605, F.S. Or, if this document is being onfirm that the limited liability company has b	th the accept g filed een
Sign	atur	By: Ariana Turoski, Special Secretary				