

L14000020533

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

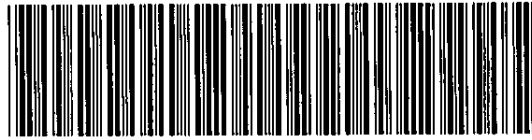
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TO AGONYVILLE
SUFFOLK COUNTY OF MASSACHUSETTS

2014 SEP 24 PM 2:03

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

14 SEP 24 AM 9:14

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

Clew's
9-26-14



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195
REFERENCE : 311728 7946205
AUTHORIZATION : *[Handwritten Signature]*
COST LIMIT : \$ 25.00

ORDER DATE : September 24, 2014
ORDER TIME : 12:03 PM
ORDER NO. : 311728-020
CUSTOMER NO: 7946205

DOMESTIC AMENDMENT FILING

NAME: 753 PARK STREET OWNER LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT
 RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS: _____

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. Name of the limited liability company: 753 PARK STREET OWNER LLC

2: (a) <u>C/O Norman Steele</u> Principal office address of limited liability company: (Note: <u>MUST BE STREET ADDRESS</u>) <u>6000 Island Blvd Suite 2108</u> <u>Aventura, Florida 33160</u>	(b) <u>C/O Norman Steele</u> Mailing address of limited liability company: (Note: <u>MAY BE POST OFFICE BOX</u>) <u>6000 Island Blvd Suite 2108</u> <u>Aventura, Florida 33160</u>
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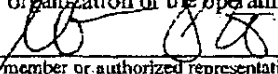
3. <u>02/04/2014</u> Date of filing/registration in Florida	4. <u>L14000020533</u> Document number
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5. (a) WEST 177TH REALTY LLC
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
2800 Island Blvd, #1300
 Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)
Aventura, FL 33160

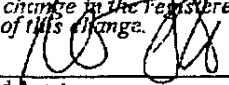
(b) WEST 177th Realty LLC
 Enter name of NEW Registered Agent and/or NEW Registered Office address:
c/o Norman Steele
NEW Registered Office Address:
6000 Island Blvd, Suite 2108
Aventura, FL 33160

14 SEP 24 AM 9:15
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

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.

 Signature of a member or authorized representative of a member	<u>NORMAN STEELE</u> Printed or typed name of signee
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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.


 Signature of Registered Agent

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