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6/11/2018

Division of Corporations



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## LLC REGISTERED AGENT CHANGE HIGHLINE FAMILY INVEST, 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	me of the limited liability company: Highline Family towest.	LI.C
2. (a)	1100 W AVE UNIT 820	(b) C/O CONSTANTIN ASSOCIATES LLP
. (4)	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
	MIAMI DEACH, FL 33139	1575 MADISON AVE 25TH FL
		NEW YORK, NY 10022
	5/1/2014	£14000070751
}, :	Date of filing/registration in Florida 4.	Document number C5.
i. (a)	Registered Agent and Registered Office shown on the records of the Flo	ride Dept. of State:
	Registered Office Address (AUST BE FLORIDA STREET ADDRESS 1100 West Ave. APT 820	
	SOUTH BEACH , FL 33130	
	Enter name of NEW Registered Agent and/or NEW Registered Office C T Corporation System	AM 9: 32
	NEW Registered Office Address: 1200 South Pine Island Road	in the second
	Plantation , FL 3332	4
he cha gent y vas/ve	mited liability company is not organized under the laws of ange or changes are made, the Florida street address of the refif be identical. Or, in the case of a Florida limited liability are huthorized by an affirmative vote of the members of the clery of organization or the operating agreement of the limited.	egistered office and the business office of the registered company, it is hereby confirmed that the change(s) limited liability company or as otherwise provided in ed liability company.  Arinolatible Plasencia
Signor	or of a member or authorized representative of a member	Printed or typed name of signed
herei rovisi he obl mere olified	by accept the appointment as registered agent and agree to ons of all statutes relative to the proper and complete perforgations of my position as registered agent as provided for the reflect a changer in the registered affice address, I hereby this writing of this change.	act in this capacity. I further agree to comply with the rmance of my duties, and I am familiar with and accept in Chapter 603, F.S. Or, if this document is being filed y confirm that the limited liability company has been
	irporation system Jonna St.	terson-Riggs, Asst. Secretary
	Division of Corporations P.O. Box 6	
	FILING FEE: S	25.00

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