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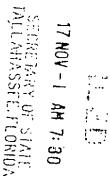
(Requestor's Name)						
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PICK-UP WAIT MAIL						
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(Control Name)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						





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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: October 26, 2017

Order#: 882986/013

Re: PDOKBH LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

X Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ashley Seeman 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: PDOKBHLLC				
2	(a)	70 EAST 55TH STREET	(b)	70 EAS	T 55TH STREET	
	(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		23RD FLOOR		23RD FLOOR		
		NEW YORK, NY 10022		NEW YORK, NY 10022		
		07/07/2014	- -	L14000107	7667	
3.		Date of filing/registration in Florida	4.	!	Document number	
5.	(a)	NRAI SERVICES, INC				
J.	(-)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State:		
		1200 SOUTH PINE ISLAND ROAD			. <u>.</u> ∡.	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			[F8 7	
					SWHY!	
		PLANTATION FI.	, 33324		ASST AND	
		, FL	,			
	(b)	Corporation Service Company			[0] 7. F.	
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	30 ATE RIO.	
		1201 Hays Street			•	
		NEW Registered Office Address:				
				<u>.</u>		
		Tallahassee , FL	32301			
the age wa	cha: Int w Vwe	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regist ability con of the limit	ered office a npany, it is l ted liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in	
,	(7)	<u></u>		Paul Ka	anavos, Manager	
					Printed or typed name of signee	
I h pro the to n not	ereb visio obli nere ifiea	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the change of this change.	ee to act i performai i for in Ci aereby cor	n this capac ace of my di apter 605, afirm that th	city. I further agree to comply with the sties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been	
Sig	กลเบร	c of Registered Agent Corporation Service Company	BY: GRA	.CE E. KIRB'	Y, ASSISTANT VICE PRESIDENT	