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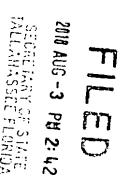
(Requestor's Name)						
(Address)						
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PICK-UP WAIT MAIL						
(Business Entity Name)						
<u></u> _						
(Document Number)						
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Jiminez

ashley.jiminez@cscqlobal.com

Date: August 1, 2018

Order#: 326382/002

Re: DIPTYQUE BAL HARBOUR 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.

XX \_\_\_ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ashley Jiminez 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

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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.

Name of the limited liability company: DIPTYQUE BAL HARBOUR LLC						
2	(a)	C/O DIPTYQUE DISTRIBUTION LLC	(b)	C/O DIF	PTYQUE DISTRIBUTION LLC	
<u>.</u> .	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_		lailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		145 W. 28TH STREET, 7TH FLOOR	<del>-</del>	145 W. 28	BTH STREET, 7TH FLOOR	
		NEW YORK, NY 10001	_	NEW YO	RK, NY 10001	
		03/26/2015		L1500005	4597	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	UNITED CORPORATE SERVICES, INC.				
		Registered Agent and Registered Office shown on the records of th	ie Florida l	Dept. of State	:	
9200 South Dadeland Blvd.						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		Suite 508			-	
		MIAMI, FL_	33156		2018 TALL	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered C	Office add	ress:	AUG -3 PA	
•					E Tr	
		1201 Hays Street			100 N	
		NEW Registered Office Address:			142 104	
				•		
		Tallahassee FL_	32301			
the ag	e cha ent v	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of icles of organization or the operating agreement of the I	the regis bility co f the limi	tered office mpany, it is ted liability	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in	
		/ Paula Levitan	Paul	a Levitan, /	Authorized Person	
Signature of a member or authorized representative of a member Printed or typed name of signee						
pr th to	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 Corporation Service Company By: Grace E. Kirby, Asst. Vice President						