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(Requestor's Name)	
(Address)	
(Address)	5003412214
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	<b>02/26/200101702</b> 3
(Document Number)	
Certified Copies Certificates of Status	FNIT
Special Instructions to Filing Officer:	S TALLENT MAR 1 8 2020
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Office Use Only



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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: Matthew Ermak matthew.ermak@cscglobal.com

Date: February 21, 2020

Order#: 186083/012

Re: TRIPLE FIVE ENTERPRISES, 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:Matthew Ermak 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. N	ame of the limited liability company: TRIPLE FIVE E	NTERP <u>RI</u>	SES, LLC	· · · · · · · · · · · · · · · · · · ·				
2. (a)	201 N. Magnolia Avenue	(b)	201 N.	Magnolia Avenue				
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		ŀ	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Suite 100		Suite 100					
	Orlando, EL 32801		Orlando,	ndo, FL 32801				
	10/30/2015		L1500018					
3.	Date of filing/registration in Florida	4.		Document number	Γ			
5. (a	NISHAD KHAN P.L.			_				
	Registered Agent and Registered Office shown on the records of t	the Florida l	Dept. of Stat	e:				
	617 E. COLONIAL DRIVE			_				
	Registered Office Address (MUST BE FLORIDA STREET)	(DDRESS)						
	ORIANDO	22002		_		2020 FE8		
	ORLANDO , FL	32803		_	•	33(		
(b)	Corporation Service Company					8 2		
(17)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	_		9	ें 1 की	
					1	A	.————————————————————————————————————	
	1201 Hays Street			_		œ.	الوسيطا	
	NEW Registered Office Address:					0,		
				_				
	Tallahassee, FL	32301		_				
the chagent was/v	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liawere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the regist ability con of the limi	ered offic npany, it i ted liabilit	e and the business is is hereby confirmed by company or as of	office o I that th	f the r e chan	egistered ge(s)	
Sion	ature of a member or authorized representative of a member	Jill C	ilmi, Autho	orized Person Printed or typed nam	an feiana			
I here provis the ob- to me notific	eby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete oligations of my position as registered agent as provided rely reflect a change in the registered office address, I want in writing of this change.  The conference of Registered Agent Corporation Service Company	performa d for in C hereby co	nce of my hapter 60: nfirm that	pacity. I further agi	ree to co miliar v ocumen v compa	omply with an t is be uny ha	with the ad accept ing filed s been	

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