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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#: 186083/013

Re: TRIPLE FIVE PROPERTIES, 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. 1	Name of the limited liability company: TRIPLE FIVE PE	ROPERT	IES, LLC		
2. <i>(</i> a) 201 N. Magnolia Avenue	(b)	201 N	. Magnolia Avenue	
z. (a	Principal office address of limited liability company:	_ (")		Mailing address of limited liability company:	
	(<u>Note: MUST BE STREET ADDRESS</u>)			(Note: MAY BE POST OFFICE BOX)	
	Suite 100	_	Suite 100 Orlando, FL 32801		
	Orlando, FL 32801	_			
	11/03/2015		L150001	186455	
3.	Date of filing/registration in Florida	4.	<u>. </u>	Document number	
5. (a	a) NISHAD KHAN PŁ				
5. (a	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of Sta	ate:	
	617 E. COLONIAL DRIVE				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			20	
				2020 FEB 26	
	ORLANDO , FL	32803		26	
				4 6 1	
(b	,			- 8	
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:	- 2	
	400411			· , · · ·	
	1201 Hays Street NEW Registered Office Address:			_	
	NEW Registered Office Audiess.				
			-	_	
	Tallahassee , FL	32301			
the c agen was/	e limited liability company is not organized under the law hange or changes are made, the Florida street address of t will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of rticles of organization or the operating agreement of the	the regis ibility co f the limi	tered office mpany, it ited liabili	ce and the business office of the register is hereby confirmed that the change(s) ity company or as otherwise provided in	
	Xie E. Cionii	Jill C	ilmi, Auth	norized Person	
Sig	nature of a member or authorized representative of a member			Printed or typed name of signee	
prov the o to me	reby accept the appointment as registered agent and agra isions of all statutes relative to the proper and complete p bligations of my position as registered agent as provided grely reflect a change in the registered office address. I had in writing of this change.	ee to act performa I for in C vereby co	in this cap ince of my hapter 60 infirm that	pacity. I further agree to comply with the duties, and I am familiar with and accomply. F.S. Or, if this document is being fill the limited liability company has been	
Signa	ture of Registered Agent Corporation Service Company	BY: Gt	ace E. K	Lirby, Asst. Vice President	

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