L17000083594

(Requestor's Name)					
(Address)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(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: Soraya Sariaslani soraya.sariaslani@cscglobal.com

Date: January 6, 2020

Order#: 118959/018

Re: LUMINAIRE (CHICAGO), 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:Soraya Sariaslani 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: LUMINAIRE (CHI	(CAGO	LLC	
2 ((a)	8950 NW 33RD ST	(b)	8950 N	W 33RD ST
\	<u>ш</u> ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		MIAMI, FL 33172	-	MIAMI, F	L 33172
		04/11/2017	- 	L1700008	
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	Anderez, Melissa			_
		Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State	ę:
	2				
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					THE SAR FAR FAR FAR FAR FAR FAR FAR FAR FAR F
		MIAMI , FL_	33172		- × × × × × × × × × × × × × × × × × × ×
((b)	TO THE			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Mice add	ress:	TACE TO SERVICE
		1201 Hays Street			
		NEW Registered Office Address:			-
					-
		Tallahassee , FL_	32301		-
the age was	cha nt v s/we	imited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist pility cou the limi	ered office npany, it is ted liability	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
	•	Lie & Comi	Jill C	ilmi, Autho	rized Person
I h pro the to r not	erel visi obl nere ified	by accept the appointment as registered agent and agree on a listatutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I he I in writing of this change. The of Registered Agent Corporation Service Company	erformu for in C ereby co	nce of my hapter 605 nfirm that	Printed or typed name of signee acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been rby, Assistant Vice President