6/22/2017

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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S. WARREN

JUN 2 6 2017

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	ame of the limited liability company:EDJ PR	OPERTIES LLO	<u> </u>
2. (a)	711 CENTED DAY DOWE		711 CENTER BAY DRIVE
	Principal office address of limited hability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited hability company. (Natr: MAY BE POST OFFICE BOX)
	WEST ISLIP, NY 11795		WEST ISLIP, NY 11795
3.	04/20/2017 Date of filing/registration in Florida	4.	L17000088456 Document number
	CHET FINKBEINER		
	Registered Apent and Registered Office shown on the reconducted SE 16TH PLACE Registered Office Address	tels of the Florida Dept. EET ADDRESS FL 33904 Stored Office address.	FILED 17 JUN 23 AM AND
	Tampa	.FL <u>33607</u>	
the ch agent was/w the art	limited liability company is not organized under thange or changes are made, the Florida street addressed by electrical. Or, in the case of a Florida limiterer authorized by an affirmative vote of the membricles of organization or the operating agreement of the companies of a member of authorized representative of a member of the appointment as registered agent on digitations of all statutes relative to the proper and complete in the segistered agent as proper reflect a change in the registered office addressed reflect a change in the registered office addressed reflect a change in the registered office addressed.	ess of the registered ted liability compa- bers of the limited liability from the limited liability.	I office and the business office of the registered ny, it is hereby confirmed that the change(s) liability company or as otherwise provided in ity company. RILEY PARK Printed or typed name of signee

Division of Corporations P.O. Box 6327 Tallahassec, F1, 32314 F1LING FEE: \$25.00

notified in writing of this change.

Signature of Registered Agent