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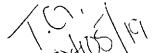


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2019 APR -4 AM 9: 39 SECRE (367 OF \$1A II) FALL ALMSSTE, FLOPELY

APPROVEU AND FILEO





CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : 120000000195

REFERENCE : 707563-1300426

AUTHORIZATION COST LIMIT : \$55.00

ORDER DATE : 4/2/2019

ORDER TIME : 10:13 AM

ORDER NO. : 707563-5

CUSTOMER NO: 4300426

CHANGE OF AGENT

NAME: PROPERTY REGISTRATION CHAMPIONS, LLC

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: LYDIA COHEN EXT 62974

EXAMINER'S INITIALS:

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

COVER LETTER

Division of Corporations	
SUBJECT: Property Registration Champions, Lt	
Name o	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this n	natter to the following:
Veronique Laverdure	
Name of Person	20
Winston & Strawn LLP	2019 APR -4 SECTED AND THE SECTED AND THE SECTED APRIL SE
Firm/Company	
200 Park Avenue	
Address	
New York, New York 100166	•
City/State and Zip Code	
vlaverdure@winston.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ase call:
Veronique Laverdure	212 294-6700
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
□ \$25 Filing Fee	☑ \$55 Filing Fee & Certified Copy
INIIS18 (2/14)	

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.

	2725 Center Place, Suite 200	(b)	(b) 2725 Center Place, Suite 200		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Melbourne, Florida 32940	 -	Melbourne, Florida	a 32940	
	July 25, 2017		L17000161860		
	Date of filing/registration in Florida	4.	Docume	nt number	
. (a)	Clifford Johnson, Esq.				
` ,	Registered Agent and Registered Office shown on the records	of the Florida I	Dept. of State:		
	2725 Center Place				
	Registered Office Address (MUST BE FLORIDA STREE	ET ADDRESS)		2019 APR -4 SECRETARIA	
				S AP	
	Melbourne ,	FL <u>32940</u>			
(b)	Corporation Service Company				
(b)	Enter name of NEW Registered Agent and/or NEW Register	red Office addr	<u>ess</u> ;	<u> </u>	
		•		至 39	
	1201 Hays Street			•	
	NEW Registered Office Address:				
					
	Tallahassee	FL 32301			
	, ,	L OLOUT			
the li	mited liability company is not organized under the large or changes are made, the Plorida street address	laws of the S	tate of Florida, it is	hereby confirmed that after	
e cha	vill be identical. Or in the case of a Florida limited	liability con	ipany, it is hereby c	onfirmed that the change(s)	
ie chai gent w			ed liability compan	y or as otherwise provided in	
ie chai gent w /as/we	re authorized by an affirmative vote of the members	s of the limit he limited lia	hility company		
ie chai gent w as/we	re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	he limited lia	bility company.		
e chargent was/we	re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	he limited lia	bility company. t Mannarino	typed name of signee	
se changent was/we articolor Signature oblino mere	re authorized by an affirmative vote of the members	he limited lia Rober Rober Refer to act in the performant ded for in Ch I hereby con	t Mannarino Printed or this capacity. I fure of my duties, an	d Law Tamilian with and accent	

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