71281000

(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL	•					
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(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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Special Instructions to Filing Officer						

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S. WARREN NOV 1 5 2017

CORPORATION SERVICE COMPANY
1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 868508 7805619							
AUTHORIZATION Smell Remain							
COST LIMIT : \$25.00							
ORDER DATE: October 16, 2017							
ORDER TIME : 11:53 AM							
ORDER NO. : 868508-012							
CUSTOMER NO: 7805619							
CHANGE OF AGENT							
NAME: DCBRE LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY							
CONTACT PERSON: Roxanne Turner EXT#							
EXAMINER:							

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.

. (a)	161 EAGLE ROCK AVENUE, 2ND FLOOR		(b)	(b) 161 EAGLE ROCK AVENUE, 2ND FLOOR			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	ROSELAND, NJ	07068		ROSELA	ND, NJ 07068		
	08/25/2017			L1700018	32617		
	Date of filing/registrat	ion in Florida	4.		Document nui	nber	
(a)	NEXTERRA LAW						
(a)	Registered Agent and Registered Offic	ce shown on the records of	f the Florida	Dept. of State			
	1691 MICHIGAN AVENUE. S			•			
		BE FLORIDA STREET	T ADDRESS)		-		
	registered office Address - HADST	DE LEONIDA STREET	.117171(12)(1)	•		 .	
					_	<u> </u>	
	MIAMI BEACH	Į;	L 33139			12 NOV 14	
		· ·	12 30100		.		
(b)	Corporation Service Company	,					
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				-		
		_				54 5	
	1201 Hays Street					· 23	
	NEW Registered Office Address:				-	⊊n: ω	
		·			_		
	Tallahassee	, F	I. <u>32301</u>				
the li	mited liability company is not o	organized under the la	iws of the S	State of Flo	orida ir is herel	by confirmed that after	
e cha	nge or changes are made, the Fl	orida street address o	of the regist	tered office	and the busine	ess office of the registere	
ent w	vill be identical. Or, in the case authorized by an affirmative	of a Florida limited l	liability coi	mpany, it is	s hereby confir	med that the change(s)	
e arti	cles of organization or the opera	iting agreement of th	e limited li	ability com	ipany.	is otherwise provided in	
P	wij when And ure of a member or authorized representation	Gorisel Sincer	PHII	IP WEBER			
Signat	ure of a member or authorized represen	itative of a member	<i>f</i> —		Printed or typed	name of signee	
herek ovisie e obli mere	by accept the appointment as re- ons of all statutes relative to the igations of my position as regist by reflect a change in the regist Fin writing of this change	gistered agent and ag proper and complet ered agent as provid ered office address, t	gree to act e performa ed for in C hereby co	in this capa nce of my c hapter 605 nfirm that i	acity. I further duties, and I ar , F.S. Or, if th the limited liah	agree to comply with the familiar with and accepts is document is being file wility company has been	
Juliu I	I'in writing of this change.	• 1		Roxa	anne Turner		
~ g '							

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

Signature of Registered Agent Corporation Service Company