L18000 112 695

(Requestor's Name)					
(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:					

Office Use Only



300335942163

10/28/19--01034--008 **25.00

ZOIS OCT 28 PH 12: 35

Y SHIKER

100/202019



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: October 24, 2019

Order#: 021928/006

Re: PSL TP OFFICE 1, 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:Meghan Groom 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.	Νi	ine of the limited liability company: PSL TP OFFICE	1, LLC			
2	(a)	1 STEVENS RD, #1	(b)	1 STEVI	ENS RD, #1	
	()	Principal office address of limited liability company:	_ (,,,		ailing address of limited liability company:	
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)	
		WALLINGTON, NJ 07057	-	WALLING	TON, NJ 07057	
		05/09/2018	_	L1800011	2695	
3.		Date of filing/registration in Florida	4.	1	Document number	
5	(a)	CT CORPORATION SYSTEM			Ž01	
	(44)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State			>= C	
		1200 S PINE ISLAND RD			S S 1	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		PLANTATION .FL_	33324			
					S ' 61	
	(b)	Corporation Service Company				
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Office add	ress:		
		1201 Hays Street				
		NEW Registered Office Address:				
		- 10				
		Tallahassee , FL	32301			
		·				
If the	he li cha	mited liability company is not organized under the laws nge or changes are made, the Florida street address of th	i of the S he regist	State of Flor ered office :	ida, it is hereby confirmed that after and the business office of the registered	
age	nt w	fill be identical. Or, in the case of a Florida limited liab	ility cor	npany, it is	hereby confirmed that the change(s)	
		re authorized by an affirmative vote of the members of eles of organization or the operating agreement of the li				
		/S/ Beth Arici	Beth	Arici, Autho	rized Person	
Signature of a member or authorized representative of a member				Printed or typed name of signee		
1 h	eret	ny accept the appointment as registered agent and agree	e to act i	n this capac	ity. I further agree to comply with the	
the	obli	ons of all statutes relative to the proper and complete pagations of my position as registered agent as provided by reflect a change in the registered office address. I he	for in Ci	apter 605	F.S. Or, if this document is being filed	
io n not	uere ifica	ty reflect a change in the registered office address, The in writing of this change.	тепу сол	yırm that th	ве итива навину сотрапу наѕ вееп	
	_	Chace CKUDY				
Sig	natur	e of Registered Agent Corporation Service Company	BY: Gra	ice E. Kirb	y, Asst. Vice President	

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