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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.

L. Na	nme of the limited liability company: Sutton C	lear	water L	LC	
2. (a)	526 SEVENTH AVE		(b) 526 SEVENTH AVE		
,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		· ·	Mailing address of limited I (Note: MAY BE POST (
	10TH FLOOR		10TH F	-LOOR	
	NEW YORK, NY 10018		NEW Y	ORK, NY 10018	
	02/06/2019		L19000	031185	
3.	Date of filing/registration in Florida	4.		Document number	
5. (a)	CORPORATION SERVICE COMPANY				
J. (II)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept, of Stat	e;	
	1201 HAYS STREET				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	SS)		20
				_	2020 :
	TALLAHASSEE	3230)1-2525		
				_	
(b)	Registered Agent, Inc.			_	
	Enter name of NEW Registered Agent and/or NEW Registered	i Office :	address:		
	7901 4th Street N				9: 1;2
	NEW Registered Office Address:			_	
	Suite 300			***	
	St. Petersburg	3370)2		
the cha agent v was/wa	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the repliability of the li	gistered offic company, it i imited liabili	e and the business officies hereby confirmed that ty company or as other	ce of the registered it the change(s)
R:L	Park	<u>R</u>	iley Park		
-	iture of a member or authorized representative of a member			Printed or typed name of	
provisi the obt to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I directly of this change.	perfor ed for in hereby	mance of my i Chapter 60, confirm that	duties, and I am famili 5, F.S. Or, if this docu	ar with and accept ment is being filed
130	- Assistar	nt Seci	retary		

Signature of Registered Agent