## M05000004017

(Requestor's Name)					
(Address)					
(Address)					
(City!)	State/Zip/Phone	2 #1			
(Oity/State/Zip/Fildite #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Doci	ıment Number)				
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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Office Use Only

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FEB 1 7 2013

T. HAMPTON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper acasper5@cscinfo.com

Date: February 12, 2014

Order#: 964083-206

Re: ASTAR FRR HOLDINGS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Ami Casper

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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. 1	Nar	me of the limited liability company: ASTAR FRR HOI	DINGS, LLC		
2. (	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	y: C/O ISTAR FINANCIAL INC. 1114 Avenue of the Americas, 39th Floor		
			NEW YORK	N\ 10036	
(	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
07/20/2005		2005	M05000004019		
3. I	Dat	te of filing/registration in Florida	1. Document number		
5.	(a)	Registered Agent and Registered Office shown on the	he records of the Florida D	ept. of State:	
Registered Agent: Registered Office Address:		Registered Agent:	C T CORPORATION SYSTEM		
		Registered Office Address:	1200 SOUTH PINE ISLAND ROAD		
			PLANTATION	FL 33324	
		NEW Registered Agent:	Corporation Service Company  1201 Hays Street		
(	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :  NEW Registered Agent:  Corporation Service Company				
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee	Dr 22201	
			Tallanassee	,FL_32301	
con and liab the the	firm the ilit me ope	imited liability company is not organized under the lamed that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise erating agreement of the limited liability company.	orida street address of the r	registered office	
Sign	atur	e of a name or authorized representative of a member		SEE M	
		Priebe, Authorized Person or typed name of signee	-	D FESTA	
con and Cha ada By	iply II o apte ires	by accept the appointment as registered agent and as with the provisions of all statutes relative to the proviming familiar with and accept the obligations of my posser 605, F.S. Or, if this document is being filed to ment is seeing filed to ment in the limited liability company that the limited liability company from the company of the seeing the company of the seeing the company of the seeing the	gree to act in this capacity, per and complete perform ition as registered agent a ely reflect a change in the has been notified in writing Sylvia Queppet, Assistant	Efurther agree to aree of my duties, is provided for in registered officeing of this change.	
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