Ni 0600001745

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(Address)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
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J SHIVERS



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.pitts@cscglobal.com

Date: July 7, 2017

Order#: 705557-168

Re: LVP ST. AUGUSTINE OUTLETS 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 Please return evidence to the following:

Attn: Marissa Rather-lopez c/o Corporation Service Company

251 Little Falls Drive 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 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. N:	ome of the limited liability company: <u>LVP ST. AUC</u>	GUSTINE OL	TLETS LLC	
2. (a)	1985 Cedar Bridge Ave	(b)	1985 Cedar Bridge Ave	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Attn: Legal Dept.		Attn: Legal Dept.	
	Lakewood NJ 08701		Lakewood, NJ 08701	
	03/24/2006		M06000001745	
3.	Date of filing/registration in Florida	4,	Document number	
5. (a)	NRAI Services, Inc			
	Registered Agent and Registered Office shown on the records of the Florida Dept, of State:			
	1200 South Pine Island Road		AS .	
	Registered Office Address (MUST BE FLORIDA STREE	<u> </u>		
	Plantation .	FL <u>33324</u>	%1 **	
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	and Office and la		
	Tantel hame of SEW Registered Agent and/or SEW Register	reg Office addr	<u>्</u>	
	1201 Hays Street			
	NEW Registered Office Address:			
		 -		
	Tallahassee	FL_32301_		
the cha agent v was/wo	imited liability company is not organized under the inge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the companization of the companization of the operating agreement of the operating a	of the registe liability cons of the limit	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in	
Signature of a number or authorized representative of a member Printed or typed name of				
. ~	()		Printed or typed name of signee	
provisi the obl to mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as providly reflect a change in the registered office address, I in writing of this change.	igree to act in te performan ded for in Ch Thereby con	i this capacity. I further agree to comply with the we of my duties, and I am familiar with and accept apter 605. F.S. Or, if this document is being filed firm that the limited liability company has been	
Signatu	re of Registered Agent Corporation Service Company	y BY: Gra	ce E. Kirby, Asst. Vice President	