M06000002556

(Re	equestor'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:						
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06/06/17--01024--025 **25.00



Office Use Only



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglboal.com

Date: June 2, 2017

Order#: 667395-011

Re: ASCOTT APARTMENTS, 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: Ashley Seeman 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.

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.	Na	me of the limited liability company: ASCOTT APART	MENTS	LLC			
2. (a)	c/o Maxx Properties	(b)	c/o Max	x Properties		
,	(-) .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		600 Mamaroneck Ave		600 Mamaroneck Ave			
		Harrison NY 10528		Harrison	NY	/ 10528	
		05/03/2006	_	M0600000	· · · · · · · · · · · · · · · · · · ·		
3.		Date of filing/registration in Florida	4.		Document number		
5.	(a)	The Elias Law Firm PLLC			•		
		Registered Agent and Registered Office shown on the records of the	e Florida l	Dept. of State:	:		
		15500 New Barn Road, Suite 104					
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)				
		Miami Lakes , FL_	33014		ALL'AI	17 JL	
		0			TAS ATT	Acceptable	
((b)	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered O</u>	Office add	ess:	<i>5</i> 1.2√	6	
		The film of the first seems of t		<u></u> .	£.€	7	
		1201 Hays Street			.54		
		NEW Registered Office Address:	-: -			4	
					3 5 0	-	
		Tallahaana	00004				
		Tallahassee , FL_	32301				
the age was	cha nt v s/we	imited liability company is not organized under the laws inge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab increa the organization or the operating agreement of the li	the regist bility cor the limi	ered office npany, it is ted liability	and the business office hereby confirmed that t company or as otherwise	of the registered he change(s)	
		/s/ Eric R. Wiener	Eric I	R. Wiener,	Authorized Person Printed or typed name of sign		
I h pro the to n	erel visi obl nere ifiec	ture of a member or authorized representative of a member by accept the appointment as registered agent and agreent of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change. The acceptance of Registered Agent Corporation Service Company	performa for in C ereby co	nce of my a hapter 605, nfirm that t	acity I further garee to	comply with the with and accept ent is being filed wany has been	

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