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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·			
(Address)					
(Address)					
(Ci	ity/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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Office Use Only



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300256603143 02/14/14--01026--014 **25.00

SECRETARY OF STATE

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#: 964083-008

Re: 11650 CENTRAL PARKWAY - JACKSONVILLE 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.	. Name of the limited liability company: 11650 CENTRAL PARKWAY - JACKSONVILLE LLC				
	(a) Principal office address of limited	Principal office address of limited liability cor	lability company: 1114 AVENUE OF THE AMERICAS		
		(Note: MUST BE STREET ADDRESS)	NEW YORK	N\ 10036	
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
03/18/2009		2009	M0900001076		
3.	Dat	e of filing/registration in Florida	4. Document number		
5.	(a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	Registered Agent:		C T CORPORATION S	C T CORPORATION SYSTEM	
	J	Registered Office Address:	1200 SOUTH PINE ISL	1200 SOUTH PINE ISLAND ROAD	
			PLANTATION	FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW I</u> <u>NEW Registered Agent</u> : <u>C</u>				Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)			1201 Hays Street		
		(MUST BE FLORIDA STREET ADDRESS	Tallahassee	,FL_32301	
co an lia the the	nfirid the bilite mee op	limited liability company is not organized under med that after the change or changes are made, the business office of the registered agent will be try company, it is hereby confirmed that the chartenbers of the limited liability company or as of the tracting agreement of the limited liability company or as of the limited liability company or as of the limited liability company or an entire of a member of a member of a member of the limited liability company or typed name of signee	the Florida street address of identical. Or, in the case of nge(s) was/were authorized berwise provided in the artic	therregistered office	
В	y:	by accept the appointment as registered agent y with the provisions of all statutes relative to a company the provisions of all statutes relative to a company the provisions of the familiar with and accept the obligations of the familiar with an accept the obligations of the familiar company that the limited liability company that the limited liability company that the familiar c			

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