(Requestor's Name)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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CORPOTATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195					
REFERENCE : 676509 8331866					
AUTHORIZATION: Spelle le man					
COST LIMIT : \$ 25.00					
ORDER DATE: May 16, 2022					
ORDER TIME : 9:13 AM					
ORDER NO. : 676509-101					
CUSTOMER NO: 8331866					
CHANGE OF AGENT					
NAME: RT NORTHPOINT III, LLC					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY					
XX PLAIN STAMPED COPY					
CONTACT PERSON: Alexxis Weiland					
EXAMINER'S INITIALS:					

## 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.

I. Na	ame of the limited liability company: RT NORTHPO	NNT III, LLC	
2. (a)	90 Park Avenue, 32nd Floor	(b)	
2. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	New York, NY 10016		
	10/13/2009	M090	000004060
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	NRAI Services, Inc.		
J. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:
	1200 South Pine Island Road		<b>20</b>
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	SECRETARY ALLAHASS
	Plantation, FI	33324	ASSEE.
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:  Corporation Service Company		AM II: 56
	NEW Registered Office Address:		<del></del>
	1201 Hays Street		
	Tallahassee, FL	32301	
change agent w was/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	registered offi ability company of the limited li	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
/s/ Jil	II Cilmi	Jill Cilmi,	Authorized Person
	ture of a member or authorized representative of a member	<del></del>	Printed or typed name of signee
I herel provision the oblito to mere	by accept the appointment as registered agent and agr ons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I	ee to act in this performance o d for in Chapte hereby confirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and accept ir 605, F.S. Or, if this document is being filed that the limited liability company has been
notified	Lin writing by this critique.	orporation Ser	vice Company
Signatur	re of Registered Agent	nı M. Casper,	, Asst. Vice President