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Special Instructions to	Filing Officer:					

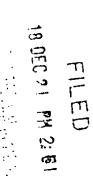
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com

Date: December 19, 2018

Order#: 508868-360

Re: NIC 4 SUNSET LAKE OWNER 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: Lindsey Baronie

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.

i.	Na	ume of the limited liability company:	NIC 4 SUNSET	LAKE OWNER	LLC	
2.	(a)	1345 Ave. of the Americas 45th Flr. Principal office address of limited lit (Note: MUST BE STREET A	ability company:	(b)	Mailing address of limited liabil (Note: MAY BE POST OFF	
		New York	N) 10105		7.11	
		04/15/2013	<u></u> .	M130	00002347	
3.		Date of filing/registration in	n Florida	4.	Document number	
5.	(a)	C T CORPORATION SYSTEM			71	
		Registered Agent and Registered Office show	wn on the records of th	e Florida Dept. of	State:	
		1200 SOUTH PINE ISLAND ROAD				
		Registered Office Address (MUST BE F	DDRESS)			
		PLANTATION	FL_	33324		EILE DEC ?!
(b	(b)	Corporation Service Company			**************************************	1
	(-)	Enter name of <u>NEW Registered Agent</u> and/	or <u>NEW Registered C</u>	Office address:		2:
		1201 Hays Street			·	
		NEW Registered Office Address:				
			-		<u> </u>	
		Tallahassee	, FL_	32301		
the age wa	chai ent w s/we	mited liability company is not organinge or changes are made, the Florida ill be identical. Or, in the case of a life authorized by an affirmative vote cles of organization or the operating a	street address of the Florida limited liab of the members of	he registered of oility company, the limited liab	fice and the business office o it is hereby confirmed that the fility company or as otherwise	f the registered e change(s)
		<u> Xie E agnie</u>		Jill Cilmi, Au	ithorized Person	_
		ure of a member or authorized representative			Printed or typed name of signe	
pro the to i not	ovisio obli nere ified	y accept the appointment as register ons of all statutes relative to the propertions of my position as registered by reflect a change in the registered of the writing of this change.	er and complete p agent as provided office address, I he	e to act in this of erformance of a for in Chapter ereby confirm to	capacity. I further agree to co my duties, and I am familiar w 605, F.S. Or, if this documen hat the limited liability compa	omply with the with and accept t is being filed ny has been
Sig	natur	e of Registered Ozent Corporation Serv	rice Company	BY: Lindsey l	M. Baronic, Asst. Vice Pres	ident