MISCOURCE 2359

(Requ	uestor's Name)				
(Addr	ress)				
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(City/S	State/Zip/Phone #)				
PICK-UP	WAIT MAIL				
(Busin	ness Entity Name)				
(Docu	ument Number)				
Certified Copies	Certificates of Status				
Special Instructions to Fil	ling Officer:				
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Office Use Only

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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@cscqlobal.com

Date: December 19, 2018

Order#: 508868-381

Re: NIC 5 LAKE MORTON PLAZA LEASING 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.

	1345 Ave. of the Americas 45th Flr.		(b)			
	Principal office address of I (Note: MUST BE ST	, ,			Mailing address of lim (Note: MAY BE PC	ited liability company: OST OFFICE BOX)	
	New York	NY 10105					

	04/15/2013			M13000	002357		
	Date of filing/registr	ration in Florida	4.		Document numbe	r	
i. (a)	CT Corporation System						
(-,	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
	1200 South Pine Island Roa	ad					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				_		
					_	ಷ್ಟ ಹೆ	
	Plantation	<u></u> , ,	FL33324			- R	
(b) .	Corporation Service Compa Enter name of NEW Registered Ap		ad Office add				
	Enter name of NEW Registered As	gent and/or NEW Register	ed Office add	ress;		3 7 0	
	1201 Hays Street					.	
	NEW Registered Office Address:				_	<u>.</u>	
					_		
	Tallahassee	, F	FL 32301				
c	mited liability company is not						
he cha igent w	nge or changes are made, the vill be identical. Or, in the case						
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