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(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)	<u> </u>								
PICK-UP WAIT MAI	L								
(Business Entity Name)									
(Sasiness Entry Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									
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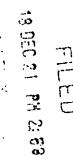
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

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#: 508868-362

Re: NIC 4 THE GRANDE 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.

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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	ime of the limited liability company:	NIC 4 THE GRAI	NDE LEA	ASING LLO	<u> </u>			
2. (a)		1345 Ave. of the Americas 45th Flr. Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_ (b)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		New York	N) 10105	_				_	
		04/15/2013	·	_	M130000				
3.		Date of filing/registration in	Florida	4.		Document numb	ег		
5.	(a)	C T CORPORATION SYSTEM				_			
·		Registered Agent and Registered Office show	n on the records of the	e Florida l	Dept. of State	- 2:			
		1200 SOUTH PINE ISLAND ROAD	1						
		Registered Office Address (MUST BE FI	ORIDA STREET AL	ODRESS)		•			
		PLANTATION	FL	33324	<u></u>	-	**; **; ;	18 0	
(b	b) .	Corporation Service Company						DEC 21	FIL
		Enter name of <u>NEW Registered Agent</u> and/c	or <u>NEW Registered O</u>	ffice add	ress:		¥ 	~ 0	EO
		1201 Hays Street						$\ddot{\wp}$	
		NEW Registered Office Address:					-	ଫ ଫ	
		Tell have			<u>-</u>	•			
		Tallahassee	, FL_	32301					
the (ager was	chai it w /we	mited liability company is not organizing or changes are made, the Florida will be identical. Or, in the case of a Fre authorized by an affirmative vote color of organization or the operating a	street address of the Torida limited liab of the members of	ne regist fility con the limit mited lia	ered office npany, it is led liability ability com	e and the business s hereby confirme y company or as o	office of	f the re	egistered ge(s)
Si	gnati	ure of a member or authorized representative of	of a member			Printed or typed nam	ne of signe	e	
prov the e to m	sisia obli ere	by accept the appointment as registered in sof all statutes relative to the properties of all statutes relative to the properties of my position as registered of the registered of the registered of the properties of this change.	ed agent and agree er and complete pe tgent as provided j ffice address, I he	e to act i erformai for in Cl rehy cor	n this cape nce of my d napter 605 nfirm that i	acity. I further ag duties, and I am fo , F.S. Or, if this o the limited liabilit	gree to co amiliar w document ty compa	mply ith an t is be ny ha:	with the id accept ing filed i been
Sign	atur	Author M. Baronie e of Registered Ogeni Corporation Serv	ice Company	BY: Lin	idsey M. I	Baronie, Asst. V	ice Pres	ident	