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COVER LETTER

	egistration Section vivision of Corporations	·	•	A TANTAL MAN C A P A A A A A A A A A A A A A A A A A			
SUBJEC	Palm Springs Congress, LL	.C					
SUBJEC	Name of Limited Liability Company						
Dear Sir o	or Madam:						
The enclo	sed Registered Agent/Registered Off	fice Change an	d fee(s) are submitted f	or filing.			
Please ret	urn all correspondence concerning th	is matter to the	e following:				
Jocelyn	C. Beckman						
	Name of Person						
ARC Pr	operties			•			
	Firm/Company		·				
1401 Br	road Street						
	Address						
Clifton,	NJ 07013						
	City/State and Zip Code						
jbeckma	an@arctrust.com						
E-m	ail address: (to be used for future ann	nual report noti	fication)				
For furthe	r information concerning this matter	, please call:					
Jocelyn	C. Beckman	973 at (249-8016				
	Name of Person		Area Code & Daytin	me Telephone Number			
R D C 26	rreet/Courier address: egistration Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, Florida 32301	R D P.	IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 323				
E	nclosed is a check for the following	; amount:					
2	\$25 Filing Fee	□ \$	555 Filing Fee & Certifi	ed Copy			
INHS18 (2.	· /14)						

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 N	ame of the limited liability company:	Cong	ress, LLC				
2. (a)	. , ,	(b)	·	•		
()	Principal office address of limited liability company:	_ `	N	Mailing address of l			
	(<u>Note: MUST BE STREET ADDRESS</u>) 1401 Broad St		1401 Bro	(<u>Note: MAYBE</u> pad St	<u>POST OFF.</u>	ICE BO	<u>)x</u>)
	Clifton, NJ 07013	_	Clifton, N	NJ 07013			
	04/23/2013		M130000	02592			
 (a) 	Date of filing/registration in Florida United Corporate Services, Inc.	4.		Document num	ber		
J. (a)	Registered Agent and Registered Office shown on the records of the 9200 S Dadeland Blvd	e Florid	a Dept. of State	- : :			
	Registered Office Address (MUST BE FLORIDA STREET AD STE 508	DDRES.	<u>s)</u>	•	TALLA	16 Al	, , , , , , , , , , , , , , , , , , , ,
	Miami , FL	33156	<u></u>	•	RELASSI	AUG I I	हैं । -किया इंडि -
(b)	NORTHWEST REGISTERED AGENT LLC			•		HP	iri
()	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office ad	dress:	•	FLERNO	-: 5	in and
	3030 N. Rocky Point Drive, STE 150A				om A	ţ	
	NEW Registered Office Address:			•			
	Tampa	33607	7				
the cha agent was/w	imited liability company is not organized under the laws ange or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of iclosof organization or the operating agreement of the liable.	s of the he regi pility co the lin imited	State of Flo stered office ompany, it is nited liability	and the busines hereby confirm company or as apany.	ss office of ned that the	f the r e char	egistered ige(s)
Signa	sture of a member or authorized representative of a member			Printed or typed na	ame of signe	e	
provis the obt to mer	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered office address, I he d in writing of this change.	erform for in	ance of my o Chapter 605,	duties, ånd I am , F.S. Or, if this	familiar w documen	vith ar t is be	id accept ing filed
To-	Tom Glover Assistant Secretary						
Signatt	ire of Registered Agent						