M1300000 4110

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	dress)	
(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Dx	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	Office Use On	ılv



100322153691

100822153591 12/1/18--0101-007 •6.00

S TALLENT JAN 0 9 2019

18 DEC 2: PH 2: C3

PIX-ch



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#: 508868-350

Re: NIC 4 ROYAL PALM OWNER LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.0.

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.

1. N	ame of the limited liability company: NIC 4 RO	YAL PALM OWNE	RLLC
2. (a)	1345 Ave. of the Americas 45th Flr.	(b)	
2. (11)	Principal office address of limited liability compar		Mailing address of limited liability company:
	(Note: MUST BE STREET ADDRESS)		(Note: MAY BE POST OFFICE BOX)
	New York N\ 10105		
	06/27/2013	M1	3000004110
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	_ C T CORPORATION SYSTEM		
. ,	Registered Agent and Registered Office shown on the reco	ords of the Florida Dept	of State:
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address (MUST BE FLORIDA ST)	REET ADDRESS)	
	PLANTATION	. FL <u>33324</u>	
(b)	Corporation Service Company		એ
(b)	Enter name of NEW Registered Agent and/or NEW Reg	istered Office address:	
	1201 Hays Street		2 =
	NEW Registered Office Address:		FILEU PA
			· · · · · · · · · · · · · · · · · · ·
			
	Tallahassee	Er 22204	4
	allatiassee	FL <u>32301</u>	
the cha agent v was/we	imited liability company is not organized under the florida street address are made, the Florida street addressill be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the memicles of organization or the operating agreement of t	ess of the registered ited liability compa bers of the limited	d office and the business office of the registered ny. it is hereby confirmed that the change(s) liability company or as otherwise provided in
	ture of a member or authorized representative of a member	Jill Cilmi,	Authorized Person
Signa	ture of a member or authorized representative of a member		Printed or typed name of signee
provisi the obli to meri notified	by accept the appointment as registered agent arions of all statutes relative to the proper and coming tions of my position as registered agent as prely reflect a change in the registered office address in writing of this change. Muley M. Divoyul are of Registered Agent Corporation Service Comp	oplete performance ovided for in Chap ess, I hereby confir	nis capacity. I further agree to comply with the of my duties, and I am familiar with and accept ter 605, F.S. Or, if this document is being filed in that the limited liability company has been
Signatu	re of Register Agent Corporation Service Comp	any BY: Lindso	ey M. Baronie, Asst. Vice President