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PICK-UP WAIT	MAIL						
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Certified Copies Certifica	tes of Status						
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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: Ashley Seeman ashley.seeman@cscglobal.com

Date: May 7, 2018

Order#: 195122-014

Re: GREEN KEY OF DELAWARE 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: Ashley Seeman 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. 1	Name of the limited liability company: GREEN KEY OF	DELAV	VARE LLC			
2. (a	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	′ ———	ARK AVENUE SOUTH, Mailing address of limited li (Note: MAY BE POST C	iability co	mpany:
	NEW YORK, NY 10016	_	NEW YO	DRK, NY 10016		
	08/21/2013	. <u>-</u>	M130000	05288		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a	HUBCO REGISTERED AGENT SERVICES, INC.					
(-)	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of Stat	e:		
	155 OFFICE PLAZA DRIVE, 1ST FLOOR)	28	
	Registered Office Address (MUST BE FLORIDA STREET A					
(b) <u>.</u>				# F	2818 HAY	11
	TALLAHASSEE , FL	32301		AHASSEE, FLORID	-9 PM	(T)
	Corporation Saniga Company			10.7 71.8	÷.	
	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered 6	Office add	ress:		. 44	
					+-	
	1201 Hays Street					
	NEW Registered Office Address:			-		
				-		
	Tallahassee FI	32301				
	, FL_	32301	····	-		
the cl agent was/v	limited liability company is not organized under the law hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of rticles of organization or the operating agreement of the law to t	the regis bility co f the limi limited li	tered offic mpany, it i ted liabilit ability con	e and the business office is hereby confirmed that ty company or as otherwand npany.	ce of the at the cha	registered ange(s)
Sign	nature of a member or authorized representative of a member	Jill C	ilmi, Autho	orized Person Printed or typed name of s	cianee	
_	()		iu thio oom	¥-	_	la anith tha
provi the o to me notifi	reby accept the appointment as registered agent and agressions of all statutes relative to the proper and complete policy in the proper and complete policy in the registered agent as provided are reflect a change in the registered office address, I head in writing of this change	performa I for in C ereby co	ince of my hapter 603 infirm that	duties, and I am famili 5, F.S. Or, if this docu the limited liability co	iar with i ment is l mpany h	and accept being filed has been
Signa	ture of Registered Agent Corporation Service Company	BY: G	ace E. Ki	rby, Assistant Vice P	residen	Ţ

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00