## 11300005376

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: March 13, 2014

Order#: 029082-016

Re: 1550 NORTH ATLANTIC, 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: Morgan Kennedy

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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

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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, 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. Name of the limited liability company: 1550 NORTH	ATLANTIC, LLC	
2. (a) Principal office address of limited liability compa		02
(Note: MUST BE STREET ADDRESS)	NORTH PALM BEACH	FL 33408
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
08/26/2013	M13000005376	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida D	ept. of State:
Registered Agent:	NATIONAL CORPORATE F	RESEARCH LTD., IN
Registered Office Address:	155 OFFICE PLAZA DR.	
	TALLAHASSEE	FL 323 <del>0</del> 1
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	FW Registered Office addr.	Peer.
NEW Registered Agent:	Corporation Service Compa	
NEW Registered Office Address:	1201 Hays Street	,
(MUST BE FLORIDA STREET ADDRESS)	Tallahassee	,FL 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change the members of the limited liability company or as otherwise operating careciment of the limited liability company.  Signatur of a member of authors: epresentative of a member	Florida street address of the entical. Or, in the case of a Fl	registered office orida limited a affirmative vote of
DONA PRIEBE Authorized Person		
Printed or typed name of signee	<del></del>	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my Chapter (05) E.S. Or, if this document is being filed to address, I kereby confirm that the limited hability composition.	nerety reflect a change in the any has been notified in writii	I further agree to ance of my duties, is provided for in registered office ig of this change.
Signature of Registered Agent Corporation Service Company  Division of Corporations, P.O. Box	,	4

**FILING FEE: \$25.00**