M14000003636

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CRETARY OF STATE

AUG 1 2 2015

8 MASON



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Marissa Rather-lopez marissa.rather-lopez@cscglobal.com

Date: August 7, 2015

Order#: 738565-002

Re: SHORELIGHT-STARS, 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: Marissa Rather-lopez 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

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	me of the limited liability company: SHORELIGHT-S	STARS, L	LC
2.	(a)	2 Seaport Lane	(b)	2 Seaport Lane
		Principal office address of limited liability company:(Note: MUST-BE STREET-ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 500	_	Suite 500
•		Boston MA 02210	_	Boston, MA 02210
		04/25/2014	-	M14000002836
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)	Registered Agents Inc		
		Registered Agent and Registered Office shown on the records of t	he Florida l	Dept. of State:
3030 N Rocky Point Dr				
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
		Ste 105A		
		Tampa , FL	33607	
(b) Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered O 1201 Hays Street NEW Registered Office Address:		Office add	- P :	
				10A
		Tallahassee , FL	32301	
the age wa	char ent w s/we	mited liability company is not organized under the law age or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regist bility cor f the limit	ered office and the business office of the registered appany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
		flet line	Joha	n De Muinck Keizer, Authorized Person
S	ignati	ure of a member or authorized representative of a member		Printed or typed name of signee
I h pro the to i not	ereb visic obli nere ified	y accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ee to act i performa I for in Ci iereby coi	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept tapter 605, F.S. Or, if this document is being filed after that the limited liability company has been
•		e of Registered Agent Corporation Service Company		ace E. Kirby, Assistant Vice President

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