1400005215

(Requestor's Name)					
(Address)					
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(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195					
REFERENCE : 676507 8331866					
AUTHORIZATION : Spelle le man					
COST LIMIT : \$25.00					
ORDER DATE : May 16, 2022					
ORDER TIME : 9:11 AM					
ORDER NO. : 676507-135					
CUSTOMER NO: 8331866					
CHANGE OF AGENT					
NAME: GPT 74TH STREET OWNER LLC					
DV DV CD DDCVDV CVD DOLLAND DV					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY XX PLAIN STAMPED COPY					
CONTACT PERSON: Eyliena Baker					
EXAMINER'S INITIALS:					

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.

. Na	me of the limited liability company: GPT 74TH STF	REET OWNER	LLC
l. (a)	90 Park Avenue, 32nd Floor	(b)	
z. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	New York, NY 10016		
	07/23/2014	M140	000005215
	Date of filing/registration in Florida	4.	Document number
(0)	NRAI Services, Inc.		
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida Dept.	of State:
	1200 South Pine Island Road		3
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		2022 JUN -9
	Plantation , FL	33324	
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office address:	AM IO: 00
	Corporation Service Company	_ 	
	NEW Registered Office Address:		
	1201 Hays Street		
	Tallahassee, FL	32301	
hange gent v /as/we	imited liability company is not organized under the law or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lia are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the State registered offi bility company f the limited li	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
/s/ Jil	Il Cilmi	Jill Cilmi,	Authorized Person
•	ure of a member or authorized representative of a member		Printed or typed name of signee
heret rovisione obli mere	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p ignions of my position as registered agent as provided by reflect a change in the registered office address, I have writing of this change	ze to act in this performance o I for in Chapte ereby confirm	s capacity. I further agree to comply with the f my duties, and I am familiar with and accept ir 605, F.S. Or, if this document is being filed that the limited liability company has been
onjied	Co.	rporation Ser	vice Company
•	$\sim \sim 1$	M Cooper	, Asst. Vice President