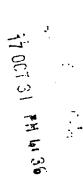
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Special Instructions to F	iling Officer:	

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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 891-9567 4384197
AUTHORIZATION Smells de man
COST LIMIT : \$ 25.00
ORDER DATE : October 31, 2017
ORDER TIME : 3:37 PM
ORDER NO. : 891956-035
CUSTOMER NO: 4384197
COSTONER NO: 4304197
CHANGE OF AGENT
CHAICH OF HOURT
NAME: SHOPS BY THE FALLS, LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
AA
CONTACT PERSON: Roxanne Turner
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.

1. 1	Name of the limited liability company: SHOPS BY TH	IE FALLS, LL	_C	
2 (a)	425 W 41st Street	(b)	P.O. Box 6481	
2. (4	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)_	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	Miami Beach, FL 33140	<u>s</u>	Surfside, FL 33154	
3.	01/21/2016 Date of filing/registration in Florida		116000000559 Document number	
5. (a) CF Registered Agent, Inc.			•
	Registered Agent and Registered Office shown on the records of	the Florida Dep	pt. of State:	
	100 S. Ashley Drive, Suite 400			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)		
			—— ≥ž g	
	Tampa ,FI	. 33602	三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三三	
		<u> </u>	SS. 31	i mba. Liping
(h	Corporation Service Company			
(b	Enter name of NEW Registered Agent and/or NEW Registered	Office address		47.
	Chief mane of 11577 Registered Agent miles 11577 Registered	Omer address	LOR A S	*
				•
	1201 Hays Street			
	NEW Registered Office Address:			
			•	
				
	Tallahassee , FI	, 32301		
the chagent was/v	limited liability company is not organized under the language or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registere lability comports of the limited	red office and the business office of the register pany, it is hereby confirmed that the change(s) If liability company or as otherwise provided in	red
	NEWS	Rimmor	n Management LLC by Ricardo A. Nevarez, M	lar
Sign	ture of a member or authorized representative of a member		Printed or typed name of signee	<u>,41</u>
provi. the ol to me	eby accept the appointment as registered agent and ag sions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ted in writing of this change.	ree to act in it performance ed for in Chap hereby confi	ee of my duties, and I am familiar with and accupter 605, F.S. Or, if this document is being fill irm that the limited liability company has been	he ept led i
	Yellowel June		Roxanne Turner	
Signat	ture of Registered Agent Corporation Service Company	BY:	Asst. Vice President	