## M16000002747

(Requestor's Name)									
(Address)									
(Address)									
(City/State/Zip/Phone #)									
PICK-UP WAIT MAIL									
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
Special Instructions to Filing Officer:									

Office Use Only



600302705106

08/18/17--01011--021 \*\*25.00

17 AUG 18 PM 4: 51
DIVISION OF COMPCHANCES

O SIMMONS AUG 2 1 2017



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: August 16, 2017

Order#: 773206-015

Re: RENAISSANCE AVENTURA 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.

## 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: Renaissance	Ave	ntura LL	.C			-
2. (a	1)	632 Broadway, 7th Floor		(b)	632 Broadway, 7th Floor			
		Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)			١	Mailing address of limited (Note: MAY BE POS)	=	· -
		New York NY 10012			New Yorl	k	NY	10012
		04/01/2016		_	M160000	02747		
3.		Date of filing/registration in Florida		4.		Document number		
5. (	a)	Armour, II, Alan I, ESQ.						
		Registered Agent and Registered Office shown on the records of	of the	: Florida I	Dept. of State	2:		
		3001 PGA Blvd.						
		Registered Office Address (MUST BE FLORIDA STREET	-					
		Suite 305					<u> </u>	٠.
		Palm Beach Gardens F	-L_	33410			,1510k	五二
(ł	(b) Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered O			fice address:			DIVISION OF CURE AREA	FILED PH 4:51
		1201 Hays Street						
		NEW Registered Office Address:					3	Ĉ.
		<u>Tallahassee</u> , F	-T_	32301				
the c agen was/	ha: t w we	mited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of th liab s of t	ne registe ility con the limit	ered office apany, it is ed liability	e and the business of s hereby confirmed to y company or as other	fice of th hat the cl	e registered hange(s)
		Kenneth Fishel		Kenn	eth Fishel,	Authorized Person		
Sig	nat	ure of a member or authorized representative of a member				Printed or typed name of	of signee	
prov the o to me	isie bli ere	by accept the appointment as registered agent and as ons of all statutes relative to the proper and completing igations of my position as registered agent as provided by reflect a change in the registered office address, all in writing of this change.	gree le pe led j I he	to act i erforman for in Cl reby con	n this cape nce of my e napter 605 ifirm that i	acity. I further agreduties, and I am fam. , F.S. Or, if this doc the limited liability o	e to compiliar with nument is company	oly with the and accept being filed has been
Sign	کے alur	re of Registered Agent Corporation Service Company		BY: Gra	ace E. Kir	by, Assistant Vice	Preside	nt

## 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.

١.	Na	me of the limited liability company: Renaissance Ave	entura L	LC			
2	(a)	632 Broadway, 7th Floor	(b)	632 Broadway, 7th Floo	Г		
~.	(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 BON)			
		New York NY 10012	_	New York	NY 10012		
		04/01/2016	_	M16000002747			
3.		Date of filing/registration in Florida	4.	Document numb	per		
5.	(a)	Armour, II, Alan I, ESQ.					
		Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of State;	سه ت		
		3001 PGA Blvd.			7		
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)				
		Suite 305			FILED 17 AUG 18 PH 4: 53 DIANSION OF CORRECTABLISMS		
		Palm Beach Gardens , FL	33410		BH #: 27		
	(b)	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registered Company  1201 Hays Street  NEW Registered Office Address:	Office add	ress:	<b>5</b>		
		Tallahassee FL	32301				
the ag wa	e cha ent v is/we e arti	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liabilities authorized by an affirmative vote of the members of cles of organization or the operating agreement of the likenneth Fishel	he regist bility con the limi imited li	tered office and the business mpany, it is hereby confirm ted liability company or as	s office of the registered ed that the change(s) otherwise provided in		
_		ture of a member or authorized representative of a member		Printed or typed na			
pro the	ovisi e obl mere	by accept the appointment as registered agent and agreent on sof all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I have in writing of this change.	e to act performa for in C ereby co	in this capacity. I further a nce of my duties, and I am ) hapter 605, F.S. Or, if this nfirm that the limited liabili	gree to comply with the familiar with and accept document is being filed ity company has been		
Si	gnatu	re of Registered Agent Corporation Service Company	BY: Gr	ace E. Kirby, Assistant V	ice President		

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