Division of Corporations **Electronic Filing Cover Sheet**

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Division of Corporations

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From:

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Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062 Phone : (888)705-7274 Fax Number : (888)706-7274

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LLC REGISTERED AGENT CHANGE 368 E. 148TH STREET ASSOCIATES, LLC

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A. LUNT

COVER LETTER

TO: Registration Section **Division of Corporations**

SUBJECT: 368 E. 148TH STREET ASSOCIATES, LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Vanessa Castillo		
Name of Person		-
Registered Agent Solutions, Inc.		
Firm/Company		-
Corporate Center One, 5301 Southwes	st Pkwy, Ste 40	00
Address		-
Austin, TX 78735		
City/State and Zip Code		-
E-mail address: (to be used for future and	nual report notific	ation)
For further information concerning this matter	, please call:	
Vanessa Castillo	888	705-7274
Name of Person		Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 thassee, Florida 32314
Enclosed is a check for the following	g amount:	
□ \$25 Filing Fee	□ \$55	Filing Fee & Certified Copy

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

ronuc	•			
1. Na	me of the limited liability company: 368 E. 1	48TH STRE	ET ASSOCIA	TES, LLC
2. (a)	400 Park Avenue South	(b) 400	Park Avenue	South
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited hat (Note: MAY BE POST OF	
	#28D	#280		1101.110.19
	New York, NY 10016		York, NY 100	016
	5/3/2016	M160	00003576	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	BLUMBERGEXCELSIOR CORPORATE	SERVICES, INC		
	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of Sta	le:	
	155 Office Plaza Drive		_	
	Registered Office Address (MUST BE FLORIDA STREET	TADDRESS)		
	1st Floor	0000	_	20 .
	<u>Tallahassee</u>	ւ_32301		2022 DEC
(b)	Registered Agent Solutions	, Inc.	_	EC 193
	Enter name of NEW Registered Agent and/or NEW Registere	ed Office address		** ,*
	155 Office Plaza Dr.		_	# 1822 ##11: 2
	NEW Registered Office Address:			27
	Suite A		_	
	Tallahassee	_{1.} 32301	_	
the char agent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address call be identical. Or, in the case of a Florida limited large authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the registered offic liability company, it of the limited liabili	e and the business office is hereby confirmed that ty company or as otherw	e of the registered the change(s)
s/ RI	ICHARD MARSHEL		MARSHELMana	
Signat	ure of a member or authorized representative of a member		Printed or typed name of sig	gnee

/s/ RICHARD M.	AKOHEL
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I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

Mackenzie Hart, Asst. Secretary