## MIL 000003611

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



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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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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: May 7, 2018

Order#: 195122-004

Re: GREEN KEY LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 $\overline{XX}$  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.

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. N                                  | Iame of the limited liability company: GREEN KEY RE  | SOURC                                   | ES, LLC   |  |                                 |                                       |
|---------------------------------------|--|---|---|--|---------------------------------|---------------------------------------|
| 2. (a)                                | 475 PARK AVENUE SOUTH, 7TH FLOOR  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)   | _ (b)                                   |   | ARK AVENUE SOUTH, Mailing address of limited lia (Note: MAY BE POST O              | ability co                      | отралу:                               |
|                                       | NEW YORK, NY 10016   | <del></del>                             | NEW YO  | DRK, NY 10016  |                                 |                                       |
| _                                     | 05/06/2016   |   | M160000   |  |                                 |                                       |
| 3.                                    | Date of filing/registration in Florida   | 4.                                      |   | Document number  |                                 |                                       |
| 5. (a) (b)                            | HUBCO REGISTERED AGENT SERVICES, INC.  |   |   |  |                                 |                                       |
|                                       | Registered Agent and Registered Office shown on the records of the   | he Florida I                            | Dept. of State                                      | e:   |                                 |                                       |
|                                       | 155 OFFICE PLAZA DRIVE, 1ST FLOOR  |   |   |  |                                 |                                       |
|                                       | Registered Office Address (MUST BE FLORIDA STREET ADDRESS)   |   |   | -<br>ین خلا  | 2010                            |                                       |
|                                       |  |   |   |  | <b>=</b>                        | 'Wirkur                               |
|                                       |  |   |   | ÄETARY OF STATE<br>AHASSEE, FLORID   | YAH                             |                                       |
|                                       | TALLAHASSEE , FL   | 32301                                   |   | - SS   | 9                               | ļ                                     |
|                                       |  |   |   | Ľ.Ô<br>E.  |                                 | 171                                   |
|                                       |  |   |   | - FS   | H                               |                                       |
|                                       | Enter name of NEW Registered Agent and/or NEW Registered   | Office add                              | ess:  | SE   | կ։ կ5                           | "Nega v"                              |
|                                       |  |   |   | 200  | ţ                               |                                       |
|                                       | 1201 Hays Street   |   |   | _  |                                 |                                       |
|                                       | NEW Registered Office Address:   |   |   |  |                                 |                                       |
|                                       | Tollohoosoo  | 00004                                   |   | -  |                                 |                                       |
|                                       | Tallahassee , FL   | 32301                                   |   | -  |                                 |                                       |
| the ch<br>agent<br>was/w              | limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the l | the regist<br>bility con<br>f the limit | ered office<br>npany, it is<br>ed liabilit          | e and the business office<br>s hereby confirmed that<br>y company or as otherw     | e of the<br>t the ch            | e registered<br>ange(s)               |
| Jill Cilmi, Author                    |  |   |   |  |                                 |                                       |
|                                       | ature of a member of authorized representative of a member   |   |   | Printed or typed name of si  | -                               |                                       |
| provis<br>the ob<br>to mei<br>notifie | eby accept the appointment as registered agent and agre-<br>tions of all statutes relative to the proper and complete p<br>digations of my position as registered agent as provided<br>rely reflect a change in the registered office address, I head in writing of this change.                 | performa<br>I for in Ci<br>ereby coi    | nce of my on apter 605<br>apter 605<br>afirm that i | duties, and I am familia<br>5, F.S. Or, if this docum<br>the limited liability com | ir with<br>nent is i<br>npany h | and accept<br>being filed<br>ias been |
| Signati                               | ure of Registered Agent Corporation Service Company  | BY: Gra                                 | ice E. Kir  | rby, Assistant Vice Pr   | esiden                          | t                                     |