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CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 3, 2017

Order#: 625661-005

Re: FIRST ACT, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

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: Ami Casper

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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.	Na	me of the limited liability company: FIRST ACT, LL	.C	<u> </u>	
2. ((a)	1067 Shotgun Road Principal office address of limited liability company:	(t	b)(d	Mailing address of limited liability company:
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
		Sunrise, FL 33326			
		07/01/2016	_	M160000	05314
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	PBYA Corporate Services, LLC			_
		Registered Agent and Registered Office shown on the records of	the Florida	a Dept. of State	2:
		200 S. Andrews Avenue, Suite 600			
		Registered Office Address (MUST BE FLORIDA STREET)	4DDRESS	5)	•
		Fort Lauderdale FL	22204		ALC: T
		Fort Lauderdale , FL	, 3330	l	- A B B
(b)	Corporation Service Company			FIL FIL
·		Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	EE, FO
					FLO
		1201 Hays Street		···-	STATE LORD
		NEW Registered Office Address:			≽ ′′′ ω ″
		<u>Tallahassee</u> , FL	32301	 	_
the agei was	cha nt w /we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the regisability co	stered office ompany, it is nited liability	e and the business office of the registered is hereby confirmed that the change(s) by company or as otherwise provided in
		dd Zebersky	Jude	d Zebersky,	Authorized Person
Si	gnati	ure of a member or authorized representative of a member			Printed or typed name of signee
prov the t	visio obli iere	y accept the appointment as registered agent and agrons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have the control of this change.	ee to act perform d for in (hereby co	t in this cape ance of my o Chapter 605 onfirm that t	ncity. I further agree to comply with the duties, and I am familiar with and accept, F.S. Or, if this document is being filed the limited liability company has been
Sigr	atur	e of Registered Agent Corporation Service Company	BY: A	mi M. Cası	per, Asst. Vice President

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