M17000 000 006

(Requestor's Name)					
(requestors 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:					
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FALL SHARSEF 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: Katie Boese katie.thomas@cscglobal.com

Date: September 10, 2019

Order#: 892396-010

Re: SYMPHONY TALENT, 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: Katie THOMAS 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. 1	lame of the limited liability company: SYMPHONY T	ALENT, L	_C		
2. (a	19 West 34th Street	(b)	19 Wes	st 34th Street	
2. (4,	Principal office address of limited liability company:	(0)		Mailing address of limited liability company:	
	(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)	
	Suite 1000	·	Suite 100	00	
	New York, NY 10001		New Yor	k, NY 10001	
	12/29/2016	_	M170000	00006	
3.	Date of filing/registration in Florida	4.		Document number	
5 (0) C T CORPORATION SYSTEM				
5. (a	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- 	
					
	1200 SOUTH PINE ISLAND ROAD Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
				_ <u>, ~</u>	
	PLANTATION FI	22224		元 19	
	, FI.	33324_		S S	
/L'	Corporation Service Company				
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:			2 P	
			<u></u> -	📜 📚 📶	
	1201 Hays Street				
	NEW Registered Office Address:			AHID: 44 OF STAIL OF STAIL	
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	Tallahassee, FL	_ 32301			
14°44.	IItend Habilton community of the body to	6.3. 6			
ii ine	limited liability company is not organized under the law ange or changes are made, the Florida street address of	ws of the S f the regist	state of Fic ered office	orida, it is hereby confirmed that after and the husiness office of the registered	
agent	will be identical. Or, in the case of a Florida limited lia	ability cor	ipany, it is	hereby confirmed that the change(s)	
	ere authorized by an affirmative vote of the members of the operating agreement of the				
		= .		•	
Signature of a member of authorized representative of a member			imi, Author	rized Person Printed or typed name of signee	
	by accept the appointment as registered agent and agr	raa to act i	n this con		
provis the ob to mei	ions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I	performa d for in Cl hereby con	nce of my a napter 605 ntirm that i	ictis. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed the limited liability company has been	
notifie	a in writing of this enouge.	.	,		
0:-	Drace Cotubly	D			
Signat	ure of Registered Agent Corporation Service Company	BY: Gra	ice E. Kir	by. Asst. Vice President	

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