

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	(Business Entity Name)
	(Document Number)
d Copies	Certificates of Status
al Instructions to	Elling Officer
	Office Use Only









CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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ACCOUNT NO. : I2000000195 **A**359216 REFERENCE : 727742 AUTHORIZATION : COST LIMIT : \$ 25.00 ORDER DATE : October 28, 2024 1024 OCT 31 ORDER TIME : 3:25 PM ORDER NO. : 727742-002 CUSTOMER NO: 7359216 eHilo: _____ CHANGE OF AGENT

NAME: PLAZA CM SERVICES, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

CONTACT PERSON: Amanda Miller

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

ursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability company abmits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

	(b) _			
Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company (<u>Note: MAY BE POST OFFICE BOX</u>)		
360 Lexington Ave 2nd Floor		360 Lexington Ave 2nd Floor		
New York, NY 10017	1	New York, NY 10017		
11/30/2017	М	17000010096		
Date of filing/registration in Florida	4.	Document number		
Registered Agent and Registered Office shown on the record				
Registered Agent and Registered Office shown on the record C T CORPORATION SYSTEM	ds of the Florida D	ept. of State:		
			202	
Registered Office Address (MUST BE FLORIDA STRE	EET ADDRESS)		2 024 0	
	EET ADDRESS)		2024 OCT	
Registered Office Address <u>(MUST BE FLORIDA STRI</u> 1200 SOUTH PINE ISLAND ROAD			2024 OCT 31	
Registered Office Address (MUST BE FLORIDA STRE 1200 SOUTH PINE ISLAND ROAD				
Registered Office Address <u>(MUST BE FLORIDA STRI</u> 1200 SOUTH PINE ISLAND ROAD PLANTATION	. FL_33324			
Registered Office Address <u>(MUST BE FLORIDA STRI</u> 1200 SOUTH PINE ISLAND ROAD	. FL_33324		2024 OCT 31 AH 10: 14	
Registered Office Address <u>(MUST BE FLORIDA STRI</u> 1200 SOUTH PINE ISLAND ROAD PLANTATION	. FL_33324			
Registered Office Address (MUST BE FLORIDA STREETED ASTREETED ASTREET ASTREETED ASTREET ASTREETASTREET ASTREET ASTREET ASTREET ASTREET ASTREET ASTREET	. FL_33324			
Registered Office Address <u>(MUST BE FLORIDA STRI</u> 1200 SOUTH PINE ISLAND ROAD PLANTATION Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regis</u> Corporation Service Company	. FL_33324			

The limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the nange or changes are made, the Florida street address of the registered office and the business office of the registered gent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) as/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in it articles of organization or the operating agreement of the limited liability company.

/S/ Dawei Wang

Dawei Wang , Authorized Person

Signature of a member or authorized representative of a member

Printed or typed name of signee

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the rovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept to 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 obliged in writing of this change.

 ωc ignature of Registered Agent

Trace E. Kirby, Asst. Vice President

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

CSC 727742