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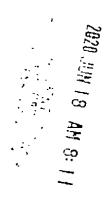
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Erika Zavala Daza erika.zavaladaza@cscglobal.com

Date: June 15, 2020

Order#: 312610-005

Re: SUNLIGHT FINANCIAL 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: Erika Zavala Daza 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 LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116. Florida Statutes, the undersigned limited liability cosubmits the following statement in order to change its registered office or registered agent, or both, in the S Florida.

1.	Na	me of the limited liability company: SUNLIGHT F	INANCIA	L LI	LC
,	(a)	234 W 39TH ST, FLOOR 7		(b)	234 W 39TH ST, FLOOR 7
	(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(0).	Mailing address of limited liability compat (Note: MAY BE POST OFFICE BOX)
		NEW YORK, NY 10018		-	NEW YORK, NY 10018
		03/20/2019			M19000002722
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	NRAI SERVICES, INC.			
٥,	(4)	Registered Agent and Registered Office shown on the records	of the Flor	ida D	Dept. of State:
		1200 S PINE ISLAND RD			2
		Registered Office Address (MUST BE FLORIDA STREE	TADDRE	<u>SS)</u>	020
					V
		PLANTATION	FL <u>333</u>	24	920 JUN 18
	(b)	Corporation Service Company			8:
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office	addr	ess:
		1201 Hays Street			
		NEW Registered Office Address:			
				-	
		Tallahassee	FL <u>323</u>	01	
th ag wa	e cha gent v as/we	mited liability company is not organized under the nge or changes are made, the Florida street address vill be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the member cles of organization or the operating agreement of the companication of the companicati	of the re l liability s of the l	giste con imit	ered office and the business office of the reg npany, it is hereby confirmed that the change ed liability company or as otherwise provide
		Xie & Conie	<u>Ji</u>	II Ci	lmi, Authorized Person
I pr th to	herei ovisi e obl mere	ture of member or authorized representative of a member by accept the appointment as registered agent and a constant of all statutes relative to the proper and completing a statutes of my position as registered agent as proview reflect a change in the registered office address. I in writing of this change.	agree to d ete perfor ided for ii I hereby	ict il mar n Ch con	Printed or typed name of signee in this capacity. I further agree to comply wance of my duties, and I am familiar with and napter 605, F.S. Or, if this document is being firm that the limited liability company has E
S	ignatu	re of Registered Agent Corporation Service Company	y BY:	Gra	ace E. Kirby, Asst. Vice President