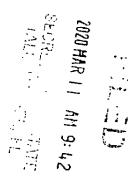
M19000007645

(Rea	uestor's Name)	
(**************************************		
(Add	ress)	·
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(City/	/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
/Door	ument Number)	
(DOC)	ument ivoniber)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	

Office Use Only



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O SIMMONS MAR 1 2 2020

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO.	. : I2000000195							
REFERENCE	3 : 227764 5015497							
AUTHORIZATION	ν : Λ .							
COST LIMIT	r : pellelle man							
	····/							
ORDER DATE : March 11, 2020								
ORDER TIME : 2:45 PM								
ORDER NO. : 227764-005								
CUSTOMER NO: 5015497								
CHANGE OF AGENT								
NAME: SETAI PROGRA	AM BORROWER LLC							
PLEASE RETURN THE FOLLOWING A	AS PROOF OF FILING:							
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Kadesha Robe	erson							
E	EXAMINER'S INITIALS:							

COVER LETTER

TO: Registration Section Division of Corporations								
SUBJECT: Setai Program Borrower LLC Name of Limited Liability Company								
Dear Sir or Madam:								
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.								
Please return all correspondence concerning this matter to the following:								
Robert A. Spiegelman								
Name of Person								
Jordache								
Firm/Company								
1400 Broadway 15th FLOOR								
Address								
New York NY 10018								
City/State and Zip Code								
Lawyerp pordache.com								
E-mail address: (to be used for future annual report notification)								
For further information concerning this matter, please call:								
Robert Spiegelman a., 212, 947-4575								
Name of Person Area Code & Daytime Telephone Number								
STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section								
Division of Corporations Division of Corporations								
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314								
Tallahassee, Florida 32301								
Enclosed is a check for the following amount:								
□ \$25 Filing Fee □ \$55 Filing Fee & Certified Copy								

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	ame of the limited liability company: SETAI PROGRA	M BOR	ROWER LL	<u> </u>			
2. (a)	1400 BROADWAY, 15TH FLR	(b)	1400 BF	ROADWAY, 151	TH FLR		
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			ailing address of li (Note: MAY BE			-
	C/O JORDACHE ENTERPRISES	-	C/O JORE	DACHE ENTER	PRISES		
	NEW YORK, NY 10018	_	NEW YO	RK, NY 10018			
	8/6/2019	_	M1900000	7645	· · · · · · ·		
3.	Date of filing/registration in Florida	4.	I	Document num	ber		
5. (a)	NRAI SERVICES INC.				• •	20.	
()	Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State:		2	2020 HAR	
	Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)					gy al. se 3 L period a la
	1200 SOUTH PINE ISLAND RD					À	1
	PLANTATION, FL_	33324			: '	9: 42	<i>ق</i> دریا
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered O	Office add	ress:		i m	2	
	1201 Hays Street						
	NEW Registered Office Address:						
	Tallahassee , FL_	32301					
the cha agent v was/w the art	imited liability company is not organized under the laws ange or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of icles of organization or the operating agreement of the liable of a member or authorized representative of a member	he regist pility con the limi	ered office npany, it is ted liability	and the busines hereby confirm company or as	ss office of sed that the	the reg change provide	istered (s) ed in
I here provisi the obi to mer	by accept the appointment as registered agent and agree ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect alchange in the registered office address. I he d in writing of this change.	e to act erforma for in C erehy co	in this capa nce of my d hapter 605, nfirm that ti	city I further o	neree to co	moly w	ith the
шицие	in in ining of this change.		Lydia Col	nen			
Signatu	re of Registered Agent Corporation Service Company	BY: '	Asst. Vice Pre	sident			