P0600011413

(F	Requestor's Name)			
(A	Address)			
(F	address)			
(C	City/State/Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to Filing Officer:				

Office Use Only



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236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

			V	VALK IN	
		PICK	UP:	10/30/18	
		CERTIFIED COPY			
	xx	РНОТОСОРУ			
		CUS			
	хx	FILING	AME	NDMENT	
1.		SALTY AIR PROPERTIE (CORPORATE NAME AND DOCUM			
2.		(CORPORATE NAME AND DOCUM	IENT #)	· · · · · · · · · · · · · · · · · · ·	
3.		(CORPORATE NAME AND DOCUM	IENT #)		
4.		(CORPORATE NAME AND DOCUM	IENT #)		
5.		(CORPORATE NAME AND DOCUM	IENT #)		
6.		(CORPORATE NAME AND DOCUM	ENT#)		
	ECIAI TRU	L CTIONS:	···		
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

in or	der to change its reg	gistered office or registe	ized under the laws of the State cred agent, or both, in the State c	•
1. The name of	of the corporation:	SALTY AIR PROPI	ERTIES, INC.	
2. The princip		SALTY AIR PROPI		
		66 White Street, Uni	6.501. NEW YORK, NY 106	113
3. The mailing	g address (if differen	nt):		
4. Date of inco	orporation/qualificat	ion:01/25/2006	Document number; P00	
		the current registered at resigned, enter resigned	gent and registered office on filed)	with the
	CORPORATION	ON SERVICE COM	PANY	
	1201 HAYS 5	STREET		201 201
	TALLAHAS	SEE, FL 32301-2525		IN OCT 30 SECRETARY TALL AHA
6. The name at (if changed)	nd street address of t		it (if changed) and 'or registered	SC I
	NRAI SERVIC	TES, INC.		1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
	1201 HAYS S	STREET		38 5
		P.O. Box NOT a	icceptable	
	TALLAHA	ASSEE, FL 32301-25.	25	
The street add as changed wi	ress of its registered Il be identical.	d office and the street a	ddress of the business office of	lits registered agent,
Such change v authorized by	vas authorized by re the board, or the co		by its board of directors or by a filed in writing of the change.	m officer so
	ture of an officer or directo		Mario, VP	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
Lhereby accep Lfurther agree	ot the appointment a to comply with the of my duties, and I a ocument is beir	is registered agent and provisions of all statu m familiar with and ac	Printed or typed name sind agree to act in this capacity, tes relative to the proper and co cept the obligation of my postil ct a change in the registered of writing of this change	omplete ion as revistered
will supe	re of Registered Ager	<u>.</u> ——	10/23/18	
If signing on b	re of Registered Ager schalf of an entity:	ik	Date	
ir signing on o Keith Vega	enan or an entity:			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

CR2E045 (03/12)