## P950000 81592

(Requestor's Name)			
(Address)			
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(Address)			
(City/State/Zip/Phone #)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
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(Document Number)			
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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: Ami Casper ami.casper@cscglobal.com

Date: January 29, 2020

Order#: 148244/101

Re: STR MANAGEMENT CORPORATION OF FLORIDA

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35\_\_\_.

Please take the following action:

XX File in your office on a routine basis.

XX \_ Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Ami Casper c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida egistered agent, or both, in the State of Florida.	
		NT CORPORATION OF FLORIDA	
1. The name of t	ne corporation:	ue, 2nd Floor, Glendale, CA 91201	
2. The principal	office address: /// // // office address:	is, 2nd Host, Gondalo, Ort 6 126 1	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 10/24/1995	Document number: P95000081592	
	street address of the current registe tment of State: (If resigned, enter re	red agent and registered office on file with the signed)	
	C T Corporation System		
	1200 South Pine Island Road		
	Plantation, FL 33324		
6. The name and (if changed):	Plantation, FL 33324  I street address of the new registered agent (if changed) and /or registered office  Corporation Service Company  1201 Hays Street  P.O. Box NOT acceptable  Tallahassee  FL 32301		
	Corporation Service Company	ن فر 	
	1201 Hays Street	ž	
	P.	O. Box NOT acceptable	
	Tallahassee	FL 32301	
		treet address of the business office of its registered agent.	
Such change was authorized by th	is authorized by resolution duly ad- ne board, or the corporation has been	opted by its board of directors or by an officer so en notified in writing of the change.	
Xie	e 2 GOnes	Jill Cilmi, Vice President	
I hereby accept I further agree of of my duties, an document is bei corporation has	to comply with the provisions of all	Printed or typed name and title  Int and agree to act in this capacity. It statutes relative to the proper and complete performance It is obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the ange.	
By: ( )	mlei	01/29/2020	
=X: Sig	hature of Registered Agent	Date	
If signing on be	half of an entity:		
	Asst. Vice President		
T	yped or Printed Name		

\* \* \* FILING FEE: \$35.00 \* \* \*