3/18/2020

Division of Corporations

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Division of Corporations

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From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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Email Address:

REGISTERED AGENT CHANGE PALM ORLANDO CORPORATION

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

	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida State unge is submitted for a corporation organized under the laws of the State of Flot	
	er to change its registered office or registered agent, or both, in the State of Flor	
i. The name of	the corporation: PALM ORLANDO CORPORATION	<u> </u>
	the corporation: PALM ORLANDO CORPORATION office address: 5800 UNIVERSAL BLVD ORLANDO, FL 32819	
	address (if different): C/O PALM MANAGEMENT CORPORATION DE ISLAND AVE., N.W., STE. 900 WASHINGTON, DC 20036	
4. Date of incor	poration/qualification: 07/21/1999 Document number: P9900006466	65
5). The name and	d street address of the current registered agent and registered office on file with tement of State: (If resigned, enter resigned)	
	CORPORATE CREATIONS NETWORK INC.	
	801 US HIGHWAY 1	
	NORTH PALM BEACH, FL 33408	2020 MAR 19 SECRETAR FALLAHASS
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	<u>, </u>
	C T Corporation System	AH 10: 06 07 STATE E.FLORID
	c/o C T Corporation System, 1200 South Pine Island Road	
	P.O. Box NOT acceptable Plantation, Florida 33324	
The street address changed will	ess of its registered office and the street address of the business office of its re-	gistered agent,
Such change was authorized by the	as authorized by resolution duly adopted by its board of directors or by an office board, or the corporation has been notified in writing of the change.	cer so
Signati	Steven L Scheinthal, Secretary Printed or typed name and title	
I hereby accept I finther agree performance of agent. Or, if th hereby confirm	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and compleiny duties, and I am familiar with and accept the obligation of my position as is document is being filed merely to reflect a change in the registered office act that the corporation has been notified in writing of this change.	registered
Ву:	poration System System System 3/18/2000	
_	nature of Registered Agent Date	
	chalf of an entity:	
	s, Assistant Secretary	
Τ)	yped or Printed Name	

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