I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD ACKERMAN

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail :

Autionzeu Person(s) Detail.			
Title	MANAGER OF THE SOLE MEMBER	Title	CFO
Name	SOLOMON, SCOTT	Name	EDWARD ACKERMAN
Address	18 EAST 50TH STREET-10TH FLOOR	Address	18 EAST 50TH STREET-10TH FLOOR
City-State-Zip:	NEW YORK NY 10022	City-State-Zip:	NEW YORK NY 10022

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

Current Principal Place of Business:

Entity Name: 3100 N FLAGLER LLC

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

18 EAST 50TH STREET-10TH FLOOR NEW YORK NEW YORK, NY 10022

DOCUMENT# L14000037281

Current Mailing Address:

18 EAST 50TH STREET-10TH FLOOR NEW YORK, NY 10022 US

FEI Number: APPLIED FOR

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

GERSON, GARY N 1645 PALM BEACH LAKES BLVD STE 1200 W PALM BEACH, FL 33401 US

SIGNATURE:

Certificate of Status Desired: No

CFO 02/24/2016

C

Date