| Guirent Maining Address. | |
|---|------------------------------------|
| 2699 COLLINS AVENUE MIAMI BEACH, FL 33140 US | |
| FEI Number: 47-5056879 Name and Address of Current Registered Agent: | Certificate of Status Desired: Yes |
| 5 5 | |

COLLINS, JAMES PATRICK 2699 COLLINS AVENUE MIAMI BEACH, FL 33140 US

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.

| SIGNATURE: | : JAMES P. COLLINS | | | 04/22/2019 |
|-------------------------------|--|-----------------|----------------------|------------|
| | Electronic Signature of Registered Agent | | | Date |
| Authorized Person(s) Detail : | | | | |
| Title | AMBR | Title | AMBR | |
| Name | COLLINS, JIM | Name | COLLINS, MICHAEL | |
| Address | 2699 COLLINS AVENUE | Address | 2699 COLLINS AVENUE | |
| City-State-Zip: | MIAMI BEACH FL 33140 | City-State-Zip: | MIAMI BEACH FL 33140 | |

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: COLLINS JIM AMBR

Electronic Signature of Signing Authorized Person(s) Detail

04/22/2019

Date

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000152876

Entity Name: 645 LENOX AVENUE, LLC

Current Principal Place of Business:

2699 COLLINS AVENUE MIAMI BEACH. FL 33140

Current Mailing Address: