LOIDDDDAY

(Re	equestor's Name)									
(Ac	ldress)									
(Address)										
(City/State/Zip/Phone #)										
PICK-UP	☐ WAIT	MAIL								
(Business Entity Name)										
(Document Number)										
Certified Copies	_ Certificates	s of Status								
Special Instructions to Filing Officer:										





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05/11/16--01018--003 **25.00

TATLAHASSEE FLORIDS

MAY 12 2016 S. YOUNG



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard

lindsey.lockard@cscqlobal.com

Date: May 9, 2016

Order#: 114823/063

Re: ZENERJI LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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:Lindsey Lockard c/o Corporation Service Company 2711 Centerville Road, Suite 400

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

TÄLLAHASSEE, TLORIDI

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	Na	me of the limited liability company: ZENERJI	LLC					
2	(a)	5801 Pelican Bay Blvd.		(b)	PO Box	c 7189		
	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Suite 104						
		Naples FL 34108			Naples, F	FL 34101		
		08/03/2001		_	L0100001	2944		
3.		Date of filing/registration in Florida		4.		Document number		
5.	(a)	NRAI Services, Inc						F.S
٠.	(4)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				- 2:	ਨ	
		1200 South Pine Island Road						岩型-
		Registered Office Address (MUST BE FLORIDA STR		•	 	SSE		
							70	E 2
						•	16 MAY 11 PM 2: 08	757
		Plantation	_, FL_	33324				332 57
							ထ	~
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	.					
		Table I alice of NEW Registered Agent and/of NEW Regis	siereu (Jince addi	ress.			
		1201 Hays Street						
		NEW Registered Office Address:				-		
				· · ·				
		Tallahassee	_, FL_	32301				
the ag wa the	e cha ent v is/we e arti	imited liability company is not organized under that the street address of changes are made, the Florida street address vill be identical. Or, in the case of a Florida limit are authorized by an affirmative vote of the members of organization or the operating agreement of the street of the stree	ess of t ted lial bers of	he regist pility con the limit imited lia	ered office npany, it is ted liability ability com	e and the business offi is hereby confirmed the y company or as other	ce of the re at the chang	gistered ge(s)
	Signa	ture of a member or authorized representative of a member	_	3111 (-1	iiii, Addioi	Printed or typed name of	signee	
I i pr the	here ovisi e obl	by accept the appointment as registered agent an ons of all statutes relative to the proper and compigations of my position as registered agent as property reflect a change in the registered office address in writing of this change.	nd agre plete p ovided ess, I he	e to act i performa for in Ci preby coi	n this capa nce of my a hapter 605 nfirm that i	••	•	vith the d accept ng filed been
Si	gnatu	re of Registered Agent Corporation Service Compa	anv	BY: Gra	ace E. Kir	by, Asst. Vice Presi	dent	

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00