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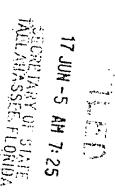
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP	WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	s of Status				
Special Instructions to Filing Officer:						
		,				

Office Use Only



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: June 1, 2017

Order#: 640385-004

Re: MAXUS CAPITAL GROUP, 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 Please return evidence to the following:

Attn: Mary Rivers

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

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

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

OUCA.XCOA

STATEMENT ÓF 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: MAXUS CAPITAL	L GROU	P, LLC	
2. (a)		(b)		
	·-·/ .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		31300 BAINBRIDGE ROAD	_	31300 BA	INBRIDGE ROAD
		CLEVELAND, OH 44139	_	CLEVELA	AND, OH 44139
		05/01/2007		M0700000	02530
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	C T CORPORATION SYSTEM			
		Registered Agent and Registered Office shown on the records of the	e Florida I	Dept. of State	;
1200 SOUTH PINE ISLAND ROAD					
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		PLANTATION, , FL_	33324		7. 17. 17.
(b)	Corporation Service Company			JUN - 5
(b) Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :				S 5	
		1201 Hays Street			
		NEW Registered Office Address:			AH 7: 25
		Tallahassee , FL_	32301		
the o ager was	char it w /wei	mited liability company is not organized under the laws age or changes are made, the Florida street address of the ill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of eles of organization or the operating agreement of the line.	of the S ne registe ility con the limit mited lia	ered office npany, it is ed liability ability comp	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Si	gnatu	re of a member or authorized representative of a member	3111 C		Printed or typed name of signee
nou	ııcu	y accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pe gations of my position as registered agent as provided j by reflect a change in the registered office address, I he in writing of this change.			
Sign	atur	Mac. C. Kubl. c of Registered Agent Corporation Service Company	BY: Gra	ice E. Kirk	ov. Assistant Vice President
-		Division of Communities and B.O. B.		T. II .	EL 2234