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R. WHITE



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscinfo.com

Date: May 19, 2015

Order#: 611716-006

Re: APPRAISAL MC, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

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: Janis M. Smith 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.

QUCA.XCOA

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.

	24 Croopway Plaza SHITE 1512	(L)		
2. (a)	24 Greenway Plaza SUITE 1512 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	HOUSTON TX 77046			
	05/18/2012	M1200	0002802	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	CT CORPORATION SYSTEM			
. (,	Registered Agent and Registered Office shown on the records of	the Florida Dept. of S	State:	
	1200 SOUTH PINE ISLAND ROAD			
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	34-	
			ASS 72	
	PLANTATION , FI	. 33324		
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered 1201 Hays Street NEW Registered Office Address:	Office address:	- 5 - 5	
	Tallahassee Fi	, 32301		
the chagent was/was/was/was/was/was/was/was/was/was/	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the authorized representative of a member or authorized representative of a member oby accept the appointment as registered agent and agains of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a children of the proper and complete ligations of the proper and the p	f the registered off ability company, of the limited liability of limited liability of Dona Priebe	fice and the business office of the registered it is hereby confirmed that the change(s) ility company or as otherwise provided in company. Authorized Person Printed or typed name of signee	

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