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(Address)								
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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: Janis M. Smith janis.smith@cscglobal.com

Date: November 13, 2015

Order#: 865519-004

Re: WALLACE ARCHITECTS, 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.

OUCA.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.

1.	Na	me of the limited liability company: WALLACE ARCH	HITECT	S, LLC.				
2 (a)	120 South Limit Avenue	(b	1				
(. - , .	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0	, <u> </u>	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Sedalia MO 65301	_					
		10/22/2012		M120000	06007			
3.		Date of filing/registration in Florida	4.		Document n	umber		
5.	(a)	NRAI Services Inc						
	(4)	Registered Agent and Registered Office shown on the records of th	e Florida	Dept of State	e:			
		1200 South Pine Island Road						
		Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS	7	_			
		_				: _:	211	
		Plantation , FL_	33324		-		NON S	EX British
((b)	Corporation Service Company			_			i grafi Economia i
	,	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	dress:	_	e of s	U	[]
						양동	<u> </u>	Very St
		1201 Hays Street			_		<u> </u>	
		NEW Registered Office Address:				.₽*		
			<u>.</u>		-			
		Tailahassee , FL_	32301		_			
the age was the S I h protector not	cha nt was/we arti ignati ereli visi obli nere ified	mited liability company is not organized under the laws nge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited liability and the case of a Florida limited liability and the case of organization or the operating agreement of the liability accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I had in writing of this change.	he regisbility control the limited lim	stered office ompany, it i ited liability iability con challed in this cap ance of my chapter 602 onfirm that	e and the busis hereby conf y company or npany.	iness offic firmed that as otherw ed name of si er agree to am familia this docum ability con	e of the the chivise property of compar with nent is inpany	e registered nange(s) ovided in ovided in oly with the rand accept being filed has been

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		10/22/2012	_	M120000	06007
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		1200 South Pine Island Road			
		Registered Office Address (MUST BE FLORIDA STREET AL	DDRESS)		
					20
					7.3 (A)
		Plantation , FL_	33324		
					20 - 20 - 10 - 10 - 10 - 10 - 10 - 10 -
(b)	Corporation Service Company			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Mice add	<u>ress</u> :	
) 2: 51 STATE -1.0RID
		1201 Hays Street	·····		음류 연
		NEW Registered Office Address:			>
					•
		Tallahassee , FL	32301		
the cager was the c	cha nt v /we arti Y/ gnn	imited liability company is not organized under the laws inge or changes are made, the Florida street address of taill be identical. Or, in the case of a Florida limited liab ire authorized by an affirmative vote of the members of cles of organization or the operating agreement of the liability of a member of puthorized tapes entative of a member	he regis oility con the limited li	tered office mpany, it is ted liability ability com	and the business office of the registered hereby confirmed that the change(s) y company or as otherwise provided in apany. **Reffree Member Printed or typed name of signee.
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algi	IEILU	To the Registered Agent Corporation Service Company	BX: G	ace E. Kii	by, Assistant Vice President

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