

A12000000 305

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

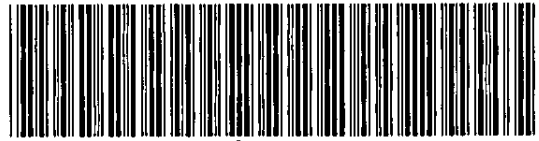
(Business Entity Name)

(Document Number)

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TALLAHASSEE FLORIDA
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FEB 05 2016
J. HARRIS

Date: 02/04/2016

Account #: I20000000088

Name: Darian Shump

Reference #: C015068

ENTITY NAME: DECC INVESTMENTS, LLLP

Articles of Incorporation/Authorization to Transact Business

Amendment

Annual Report

Change of Agent

Reinstatement

Conversion

Merger

Dissolution/Withdrawal

Fictitious Name

Other: _____

Authorized Amount: 35.00

Signature:  _____

115 North Calhoun Street, Suite #4, Tallahassee, FL 32301

Telephone: (866) 625-0838 Fax: (866) 625-0839 International +1 (212) 947-7200

E-Mail: info@nationalcorp.com Website: www.nationalcorp.com

**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP
STATEMENT OF CHANGE OF REGISTERED OFFICE OR
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. DECC Investments, LLLP
Name of Limited Partnership or Limited Liability Limited Partnership

2. 05/25/2012 3. A12000000305
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

BIONDO, CLINTON
Name

5601 ARBOR LANE
Address

CORAL GABLES, FL 33156
City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

National Corporate Research, Ltd., Inc.
Name

115 North Calhoun Street, Suite 4
Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301
City, State and Zip

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TALLAHASSEE FLORIDA

6. Such change(s) is/are effective when filed by the Florida Department of State.

[Signature] managing member
Signature of General Partner of DECC Holdings LLC, GP

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
Signature of Registered Agent Brandie Sullivan, Assistant Secretary

Filing Fee: \$35.00
Certified Copy (optional): \$52.50