LOUDYTES

(Re	equestor's Name)			
(Ac	ldress)			
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(Ac	idress)			
(Ci	ty/State/Zip/Phone	> #)		
PICK-UP	☐ WAIT	MAIL MAIL		
(Bu	usiness Entity Nan	ne)		
(1)	ocument Number)			
(DC	ocument Number)			
Certified Copies	_ Certificates	Certificates of Status		
Special Instructions to Filing Officer:				





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FEB 04 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: Janis M. Smith janis.smith@cscglobal.com

Date: February 1, 2016

Order#: 962286/001

Re: ASSET ADVISORS OF AMERICA, 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 Return Regular Mail in the enclosed envelope.

Attn:Janis M. Smith

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

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.

	1855 W. State Road 434	(b)_	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Longwood, FL 32750	-	
	06/24/2004		L04000047565
3 .	Date of filing/registration in Florida	4.	Document number
5. (a)	Thomas P. Moran		
/. (u)	Registered Agent and Registered Office shown on the records of	f the Florida D	ept. of State:
	111 N. Orange Avenue, Suite 1200		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	_
			金田 田 田
			B-3 = 0
	Orlando , F	L <u>32801</u>	
(1.)	Corneration Service Company		
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registere	d Office addre	
			-
	1201 Hays Street	· · · · · · · · · · · · · · · · · · ·	-
	NEW Registered Office Address:		
	- " " " " " " " " " " " " " " " " " " "		
	Tallahassee , F	L 32301	
C.1		C.4. C.	
	limited liability company is not organized under the la ange or changes are made, the Florida street address o		
	will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members		
he art	icles of accanization or the sperating agreement of the	e limited lia	bility company.
		Dona	Priebe, Authorized Person
	ture of a member of schorized representative of a member		Printed or typed name of signee
Sign			
I hero provis the ob- to mer	Sy accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address, I din writing of this change.	gree to act ir e performan ed for in Ch hereby con	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accep apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been

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