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

Date: August 9, 2016

Order#: 241064/017

Re: ORIGINS, 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.

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## 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. N	lame of the limited liability company: ORIGINS, LLC		
2. (a)	1600 NW 163 STREET	(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)
	MIAMI, FL 33169		
	01/25/2006	L06	000008686
3.	Date of filing/registration in Florida	4.	Document number
5. (a	) HERMAN, ALISON PGC		
``	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:		
	1600 NW 163 STREET		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		
	MIAMI , F	L 33169	· · ·
	Corporation Service Company		
	Enter name of NEW Registered Agent and/or NEW Registered Office address:		
	1201 Hays Street		
	NEW Registered Office Address:		
			<del></del>
	Tallahassee, F	L_32301	
the chagent was/v	limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the	of the registered liability compar s of the limited l	loffice and the business office of the registered ny, it is hereby confirmed that the change(s) iability company or as otherwise provided in
	Xia & Court	Jill Cilmi,	Authorized Person
Sign	nature of a number of authorized representative of a member		Printed or typed name of signee
I her provi the or to me notifi	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and complet bligations of my position as registered agent as provid rely reflect a change in the registered office address, ed in writing of this change.	gree to act in th le performance led for in Chapt I hereby confirn	is capacity. I further agree to comply with the of my duties, and I am familiar with and accep er 605, F.S. Or, if this document is being filed n that the limited liability company has been
Signa	ture of Registered Agent Corporation Service Company	BY: Grace	E. Kirby, Asst. Vice President