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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Spencer Boyden spencer.boyden@cscglobal.com

Date: March 13, 2018

Order#: 115345/005

Re: JOPICO, LLC

Enclosed please find:

*XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

Wilmington, DE 19808

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Spencer Boyden c/o Corporation Service Company 251 Little Falls Drive

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.

1.	Name of the limited liability company: _JOPICO, L	LC			
2. (a	a) 784 DREAM ISLAND RD	(b)	715 W. SW	ANN AVE.	
	Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	LONG BOAT KEY FL 34228		TAMPA	FL	33606
	12/18/2006		L060001202	69	
3.	Date of filing/registration in Florida	4.	Doe	cument number	
5. (a) WILLIAM P GREGORY, PA				
·	Registered Agent and Registered Office shown on the reco	rds of the Florida I	Dept. of State:		
	715 W. SWANN AVE.				
	Registered Office Address (MUST BE FLORIDA STR	REET ADDRESS)			
•					
	ТАМРА	_, FL <u>33606</u>			
(b)	Corporation Service Company				₹
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regi</u>	stered Office addi	<u>ress</u> :	A TO	道第二
	1201 Hays Street			ξ, Γ Γ	NOTED TO THE
	NEW Registered Office Address:			,	D PM 12: 07
	Tallahassee	, FL 32 <u>3</u> 01			N -1
the c agen was/	e limited liability company is not organized under the change or changes are made, the Florida street addrest will be identical. Or, in the case of a Florida limit were authorized by an affirmative vote of the member ticles of organization or the operating agreement of	ess of the regist ted liability con bers of the limit	ered office and apany, it is her ed liability co	the business of beby confirmed mpany or as oth	ffice of the registered that the change(s)
	/S/ JOZEF PILCH	JOZE	F PILCH, AU1	HORIZED PER	RSON
Sig	nature of a member or authorized representative of a member		Prir	ted or typed name	of signee
I he prov the o to m notif	reby accept the appointment as registered agent an isions of all statutes relative to the proper and com obligations of my position as registered agent as pro erely reflect a change in the registered office addre aled in writing of this change.	d agree to act i plete performa ovided for in Cl ss, I hereby con	n this capacity nce of my dution napter 605, F.L nfirm that the l	e. I further agrees, and I am fan S. Or, if this do imited liability	ee to comply with the niliar with and accep cument is being filed company has been
	Drace L-Kuby	_			
Signa	ature of Registered Agent Corporation Service Compa	nv BY: BY	: GRACE E.	KIRBY, ASS	IST VP