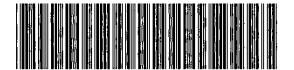
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(Requestor's Name)					
(Address)					
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SECRETARY OF STATE FALLAHASSEE, FLORIDA

SECRETARY OF STATE OF CORPORATION

15 JUN 12 AM 4:37

JUN 1 5 2015

COVER LETTER

то:	Registration Section Division of Corporations					
CUDI	Big Boss X, LLC					
SUBJ		e of Limited Li	iability Company			
Dear S	Sir or Madam:					
The er	nclosed Registered Agent/Registered Offi	ice Change and	fee(s) are submitted for filing.			
Please	return all correspondence concerning thi	is matter to the	following:			
Debb	pie Link					
	Name of Person		_			
Philli	ps Energy, Inc.					_
	Firm/Company			70	5	SEG
806 \	West James Lee, Blvd.			CLAHA	i Nor	ORE TA
	Address			SSEE Will a	12 !	S CONTRACTOR
Cres	tview, FL 32536			OF STA	MH 4: 37	E STATE PORATIONS
	City/State and Zip Code		_	SA	37	ATION THE
debb	ie@phillipsenergyinc.com					
Ē	E-mail address: (to be used for future ann	ual report notif	ication)			
For fu	rther information concerning this matter,	please call:				
Debb	pie Link	850	682-5127			
	Name of Person	at () Area Code & Daytime Telep	hone Number		
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Re Div P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 Ilahassee, Florida 32314			
	Enclosed is a check for the following	amount:				
	☑ \$25 Filing Fee	□ \$5	55 Filing Fee & Certified Copy	,		

INHS18 (2/14)

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: Big Boss X, L	LC		7026				
2. (a) 42 Business Centre Dr (b) 42 Business Cent					ess Centre	Dr		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)					
	Suite 101			Suite 101	l			
	MIRAMAR BEACH, FL 32550	_		MIRAMA	R BEACH, I	FL 32550		
	06/23/2010		1	1000006	8399			
3. 5. (a	Date of filing/registration in Florida PARACORP INCORPORATED	4,	-	1	Document nun	nber		
J. (c	Registered Agent and Registered Office shown on the records of the 155 OFFICE PLAZA DRIVE			Dept. of State:				
	Registered Office Address (MUST BE FLORIDA STREET A	(DDR	ESS)					
	TALLAHASSEE ,,FL	323	01			¥.C.	<u>3</u> 5	SEIVIG
(b)	, Debbie Link						NOL	DE SE
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Offic	e add	ress:		TAF ASSI	2	무중
	806 West James Lee Blvd.					HOT P	3	
	NEW Registered Office Address:					ORIDA	AH 4: 37	FILED ARY OF STATE F CORPORATIONS
	Crestview , FL	325	36					ri
the clagent was/v	limited liability company is not organized under the law hange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited li- were authorized by an affirmative vote of the members of rticles of organization of the operating agreement of the	the abilit abilit of the limit	regis y con limi ted li	tered office mpany, it is ted liability ability com	and the busin hereby confir company or a pany.	ess office or med that the as otherwis	of the r ne char	egistered ige(s)
Sign	nature of amember or authorized representative of a member		Kup		s, Manager Printed or typed		ec	
I her provi the o	reby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete bligations of my position as registered agent as provide crely reflect a change in the registered office address, I seed in writing of this change.	ee to perfe d for herei	g act orma in C by co	in this capa	icity. I furthei	r agree to o	omnly	with the 1d accept ing filed s been
/ Signi	ture of Registered Agent							