1/1000/38945

(Requestor's Name)					
(Address)					
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(Document Number)					
Certified Copies	Certificates	s of Status			
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K.SALY EXAMINER FEB 15



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 10, 2016

Order#: 973489/004

Re: OLNEYA RESTORATION GROUP, 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.

1.	Na	me of the limited liability company: OLNEYA REST	ORATION	GROUP, LLC	
2.	(a)	1887 CRAIG ROAD Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)_		ng address of limited liability company: ote: MAY BE POST OFFICE BOX)
		ST. LOUIS MO 63146			
		12/09/2011		_1100013894	5
3.		Date of filing/registration in Florida	4.	Doo	cument number
5.	(a)	LICENSES, ETC, INC.			
	()	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State:	
		15275 COLLIER BLVD. #201-300			7
		Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		Ole F
		NAPLES , FL	34119		2016 FEB 12 PH
	(b)	Corporation Service Company			
,	.0)	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	ess:	i i
		1201 Hays Street			-
		NEW Registered Office Address:			
		Tallahassee , FL	32301		
the age: was the	char nt w /we artic	mited liability company is not organized under the lawnge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited liare authorized by an affirmative vote of the members of the organization or the operating agreement of the	the registe ability com of the limite limited lia	red office and pany, it is hered liability con bility compan Priebe, Autho	If the business office of the registered reby confirmed that the change(s) impany or as otherwise provided in y. Trized Person
Si	gnat	ure of a nember or authorized representative of a member		Prin	nted or typed name of signee
pro the to n noti	visio obli iere fiea	y accept the appointment as registered agent and agrons of all statutes relative to the proper and complete gations of my position as registered agent as provided by reflect a change in the registered office address, I have been been address, I have been been address, I have been address.	performan d for in Ch hereby con	ce of my dutie apter 605, F.S Irm that the l	es, and I am familiar with and accept S. Or, if this document is being filed imited liability company has been

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