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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: Evelyn Wright

Date: October 18, 2013

Order#: 844958/015

Re: NEXTITLE, LLC

Enclosed please find:

XX __ Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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:Evelyn Wright

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

2013 OCT 21 TH 1: 33

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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 lim	nited liability company: NEXTITLE	, LLC	
	fice address of limited liability con UST BE STREET ADDRESS)	npany: 2035 120th Avenue NW Suite 100 Bellevue, WA 98005	
	dress of limited liability company: 14 BE POST OFFICE BOX)	2035 120th Avenue NE Suite 100 Bellevue, WA 98005	
08/28/2013		L13000121947	28
3. Date of filing/re	gistration in Florida	4. Document number	300 6
5. (a) Registered	Agent and Registered Office show	n on the records of the Florida	Dept. of State:
Registered	Agent:	CT Corporation System	
Registered	Office Address:	1200 South Pine Island F Plantation, FL 33324	Road W
		Corporation Service Com	
	S FLORIDA STREET ADDRESS	Tallahassee	,FL 32301
confirmed that after and the business of liability company, the members of the the operating agree	ity company is not organized under the change or changes are made, fice of the registered agent will be it is hereby confirmed that the chare limited liability company or as other ment of the limited liability company or as a confirment of the limited liability company or as a confirment of the limited liability company or as authorized representative of a member	the Florida street address of the identical. Or, in the case of a nge(s) was/were authorized by herwise provided in the article.	e registered office Florida limited an affirmative vote of
Dona Priebe, Author Printed or typed name of			
I hereby accept the comply with the prand I am familiar y Chapter 608, F.S. address, I hereby c	e appointment as registered agent ovisions of all statues relative to the obligations of it of the control of the control of the confirm that the limited liability control of the control	and agree to act in this capaci he proper and complete perfor ny position as registered agen to merely reflect a change in t mpany has been notified in wri	ty. I further agree to mance of my duties, t as provided for in he registered office ting of this change.
Signature of Registered		nny Grace E. Kirby, Asst. V	P