## 114000163280

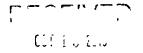
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Special Instructions to Filing Officer:		
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Office Use Only

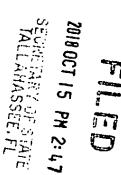


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10/16/18--01030--007 \*\*25.00



A Siger





CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Anthony Arthur anthony.arthur@cscglobal.com

Date: October 4, 2018

Order#: 419744/047

Re: RNSDS, 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:Anthony Arthur c/o Corporation Service Company 251 Little Falls Drive 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. N	ame of the limited liability company: RNSDS, LLC		
2. (a)	5150 FLORIDA BLVD.	(b)	5150 FLORIDA BLVD.
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	BATON ROUGE, LA 70809	_	BATON ROUGE, LA 70809
	10/14/2014	_	L14000163280
3.	Date of filing/registration in Florida	4.	Document number
5. (a	NRAI SERVICES, INC		
	Registered Agent and Registered Office shown on the records of t	t <b>he</b> Florida E	
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS)	
	Plantation , FL	33324	TILL TIL
(b)	Corporation Service Company		7 C
(-)	Enter name of NEW Registered Agent and/or NEW Registered	Office addr	en:
	1201 Hays Street		, · · ·
	NEW Registered Office Address:		
	Tallahassee FL	32301	
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia vere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the registe ability com of the limit	ered office and the business office of the registered apany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in
	/s/ Jill Cilmi	Jill Cil	mi, Authorized Person
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee
provis the ob- to met	thy accept the appointment as registered agent and agre- tions of all statutes relative to the proper and complete digations of my position as registered agent as provided rely reflect a change in the registered office address, I had in writing of this change.	ee to act in performar d for in Ch hereby con	n this capacity. I further agree to comply with the ace of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Signat	ure of Registered Agent Corporation Service Company	BY: Gra	ice E. Kirby, Assistant Vice President

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