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(Re	equestor's Name))		
(Ac	idress)			
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CSC - WILMINGTON 251 Little Falls Drive De 19808 Wilmington

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

meghan.groom@cscglobal.com From: Meghan Groom

Date: May 29, 2020

Order#: 300094/003

Re: CASEY RESEARCH, 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: Meghan Groom

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.	Name of the limited liability company:	ARCH, LLC				
2. (a	55 NE 5TH AVENUE, SUITE 300		(b) 55 NE 5TH AVENUE, SUITE 300			
2. (0	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	_	address of limited liability company: MAY BE POST OFFICE BOX		
	DELRAY BEACH, FL 33483		DELRAY BEAC	H, FL 33483		
	05/06/2015		_15000084539			
3.	Date of filing/registration in Florida	4.	Docu	ment number		
5. (a) INTERAMERICAN CORPORATE SERVICES LLC					
J. (Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	2525 PONCE DE LEON BLVD., SUITE 1225					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	CORAL GABLES . F	, 33134		~		
	· 「	اب <u></u>				
(t	3)			1		
((Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registere</u>	d Office add	<u>ress</u> :	; >		
	Corporation Service Company			;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;;		
	NEW Registered Office Address:			27		
	1201 Hays Street					
	Tallahassee	. 32301				
	, F	L				
chan agen was/	e limited liability company is not organized under the la ge or changes are made, the Florida street address of the t will be identical. Or, in the case of a Florida limited I were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	e registered iability con of the limited lia	l office and the tappany, it is hereled liability company.	ousiness office of the registered by confirmed that the change(s) pany or as otherwise provided in		
	Xel Culmi	JIII C	ilmi, Authorized	Person ed or typed name of signee		
I he prov the o to m notif	nature of a member or authorized representative of a member reby accept the appointment as registered agent and ag isions of all statutes relative to the proper and complete ibligations of my position as registered agent as provide erely reflect a change in the registered office address, I in writing of this change.	e performa ed for in Ci hereby coi	n this capacity.	I further agree to comply with the and I am familiar with and accept Or, if this document is being filed nited liability company has been		

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