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Division of Corporations

## Florida Department of State

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

l'ursuant 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

Principal office address of limited flability company; (Note: MUST BE STREET ADDRESS)  19/06/2016  Date of filling/registration in Florida  Gregory M. Weigand  Legistered Agent and Registered Office shown on the records of the DLA Piper LLP (US)	£160003-4.	Document numbe	ST OFFI	
Date of filling/registration in Florida  Gregory M. Weigand  legistered Agent and Registered Office shown on the records of the  DLA Piper LLP (US)	4.	Document numbe		
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DLA Piper LLP (US)	Florida Dept. of St		C;	
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Contract College Address College De Clonen Lemanter La		22.22	W.	
Registered Office Address (MUST BE FLORIDA STREET AD		- 355	2200	1
200 South-Biscayne Blvd. Ste 2500 , Mlami Fl; 33131		n n	7	
				O
, Fl				
		DA DE	Ŏ.	
mer name of NEW Registered Agent and/or NEW Registered O	ffice address:	<del></del>		
NRAI Servicės, Inc.				
NEW Registered Office Address:		_		
1200 South Pine Island Road		<del></del>		
Plantation 7.1 3	3324			
nited liability company is not organized under the laws go or changes are made, the Florida street address of the liability of the liability of the members of antiorized by an affirmative vote of the members of cs of a gamization of the depending increment of the liability of t	ne registered offi ility company, it the limited liabil mited liability co	ce and the business is hereby confirmed ity company or as of ompany.	office of I that the	the registe change(s)
The same of the sa	Gregory M. We	•		
•		• •		
accept the appointment as registered agent and agree as of all statutes relative to the proper and complete pations of my position as registered agent as provided y reflect a change in the registered affice address, I he in writing of this change.	to act in this ca erformance of m for in Chapter 60 rehy confirm tha	pacity. I further agg y duties, and I am fa 05, F.S. Or, if this d at the limited liahility	ree to co miliar w ocument compai	mply with with and ac- t is being fi ny has hee
一 トープー 甲一 自己 シマ・シュ・ティアアン	NRAI Services, Inc.  NRAI Serv	Plantation  Planta	Plantation	muer name of NEW Registered Agent and/or NEW Registered Office address:  NRAI Services, Inc.  NRAI Services, Inc.

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25,00