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D. SCOTT APR 2 8 2017

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE : 617358 AUTHORIZATION COST LIMIT ORDER DATE: April 27, 2017 ORDER TIME : 3:33 PM ORDER NO. : 617358-005 CUSTOMER NO: 98083A CHANGE OF AGENT NAME: THE SSI GROUP, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Melissa Zender -- EXT#

EXAMINER:

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: THE SSI GROU	UP, LLC		
2 (a)	4721 MORRISON DRIVE	(b)	4721 N	IORRISON DRIVE
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0,		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	MOBILE, AL 36609		MOBILE	, AL 36609
	12/30/2016		L170000	00347
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	RASMUSSEN, ROBERT C			
J. (4)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	- e:
	100 NORTH TAMPA STREET SUITE 2200			
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)	·	-
				ts 🛪
	TAMPA , FL	. <u>33602</u> -	5809	
				E B
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	Office add		LED WASSEE, FI
	Line same of 1724 Registered Agent and of 1424 Registered	Office aud	<u> </u>	而 _ 日
	1201 Hays Street			
	NEW Registered Office Address:			7: 09 STATE ALGRED
				DA 30
		·		
	Tallahassee, FL	, 32301	····	
the cha agent v was/we	imited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia- tre authorized by an affirmative vote of the members of this of organization or the operating agreement of the	the regist ability cor of the limi limited li	ered office npany, it is ted liability	and the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in apany.
Signat	ure of a member or authorized representative of a member		1 Giorna, C	Printed or typed name of signee
I herel provision the obli to mere notified	by accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have a change in the registered office address, I have a change.			
01	M. Trub		Aelissa Z	
Signatui	e of Registered Agent Corporation Service Company	BYASS	t. Vice P	resident
	Division of Cornerations PA	Ray 63274	Tallahas	see ET 33314

FILING FEE: \$25.00