MOZ 600000 240

(Re	questor's Name)				
(Address)					
(Address)					
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificate:	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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07/29/16--01027--019 **25.00

JUL 29 PH 3: 2:
SECRETARY OF STATE
TALL AHASSEE FLOORS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscqlobal.com

Date: July 27, 2016

Order#: 219000-095

Re: SSA COOPER, 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 Please return evidence to the following:

Attn: Janis M. Smith c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

SECRETARY OF STATE

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:	SSA COOPER I	LC			
2. (a)	1131 SW KLICKITAT WAY C/O KY	FR LUKIN:	(b)			
	Principal office address of limited lia (Note: MUST BE STREET A	ability company:	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	SEATTLE	W. 98134				
	01/28/2002		M0	2000000240		
3.	Date of filing/registration in	r Florida	4.	Document number		
5. (a)	NRAI SERVICES, INC					
	Registered Agent and Registered Office show	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
	1200 SOUTH PINE ISLAND ROAL			AN SE		
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
	Plantation	, FL_	33324	Z9 PH 29 PH ARY OF S ASSEE, FI		
(b)	Corporation Service Company Enter name of NEW Registered Agent and	or <u>NEW Registered</u>	Office address:	3: 27		
	1201 Hays Street					
	NEW Registered Office Address:					
	•					
	Tallahassee	, FL_	32301			
the ch agent was/w	ange or changes are made, the Florida will be identical. Or, in the case of a l	street address of Florida limited lia of the members or	the registered bility compar f the limited l	e of Florida, it is hereby confirmed that after doffice and the business office of the registered by, it is hereby confirmed that the change(s) iability company or as otherwise provided in ty company.		
	Jee & White		Jill Cilmi,	Authorized Person		
(pare of a member or authorized representative		_	Printed or typed name of signee		
provis the ob to mer	by accept the appointment as register ions of all statutes relative to the propligations of my position as registered ely reflect a change in the registered in writing of this change	ed agent and agre per and complete p agent as provided office address, I h	ee to act in th performance I for in Chapi sereby confiri	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed n that the limited liability company has been		
Signati	Tre Registered Agent Corporation Service	vice Company	BY: Sylvia	a Queppet, Asst. Vice President		