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· (R	equestor's Name)								
(A	ddress)								
(Address)									
(C	ity/State/Zip/Phone	· #)							
PICK-UP	☐ WAIT	MAIL							
(Business Entity Name)									
(Document Number)									
Certified Copies Certificates of Status									
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Office Use Only



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: June 10, 2015

Order#: 641166-005

Re: EMBER RIDGE INVESTORS GP, L.C.

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 Please return evidence to the following:

Attn: Lindsey Lockard 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.

OUCA.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.	Na	me of the limited liability	company: EMBER RID	GE I	NVESTOR	RS GP, L	.C.		
2	(a)	2800 N. DALLAS PARKI	WAY, SUITE 100		(b)_				
۷.	(<i>u</i>)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			_ (0)_	N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
		PLANO	T> 75093						<u></u>
		02/23/2004			_1	10400000	00728		
3.		Date of filing/re	gistration in Florida		4.		Document number		
5.	(a)	C T CORPORATION	SYSTEM						
٦.	(a)	Registered Agent and Register	:	≥ 8	2815				
		1200 SOUTH PINE ISL	AND ROAD					盐湯	≒
			(MUST BE FLORIDA STRE	ET AL	DDRESS)			- 25 A	
		<u> </u>							12 /
		PLANTATION		FL_	33324			EL SEAT	M II: 43
		0						∑.c.ı	చ్
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address:							
		Elici nane of <u>Frest Register</u>	eurizen mwoi 1454 regist	ortu c	THE HOUTES				
		1201 Hays Street							
		NEW Registered Office Addr	ess:						
									
		Tallahassee		FL	32301				
th- ag wa	e cha ent v as/we	imited liability company inge or changes are made, will be identical. Or, in the authorized by an affirrules of organization or the	the Florida street address e case of a Florida limite native vote of the membe	s of t d liab rs of	he register pility comp the limited	ed office cany, it is d liability	and the business of thereby confirmed the company or as other	fice of the hat the cha	registered ange(s)
		12			Dona F	Priebe, Au	uthorized Person		
	Signa	tire a member or authorized	representative of a member			<u> </u>	Printed or typed name of	f signee	
pr th to	ovisi e obl mere	by accept the appointment ons of all statutes relative igations of my position as ely reflect a change in the I in writing of this change	e to the proper and completegistered agent as provered agent as provered office address.	agre lete p vided s, I hë	e to act in erformand for in Cha ereby confi	this cape se of my c apter 605 irm that i	acity. I further agree duties, and I am fam , F.S. Or, if this doc the limited liability c	e to compl iliar with sument is l company h	ly with the and accept being filed as been
Si	gnatu	Sexue Que Mire of Registered Agent Corpo		ıν	BY: Svlv	ia Ouen	pet, Assistant Vice	Presiden	ıt