

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
(City/State/Zip/Phone #)					
PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Basilioso Elilly Hallo)					
(Document Number)					
Certified Copies	Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



600284560226



04/14/16--01011--026 **25.00

2016 APR 14 PM 2: 55

K.SALY EXAMINER APR 15



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@cscglobal.com

Date: April 12, 2016

Order#: 072711-011

Re: BROKERS INTERNATIONAL FINANCIAL SERVICES, 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.

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	ame of the limited liability company: BRC	KERS INTE	RNATIO	NAL FINA	NCIAL SERVICES, LLC
2. (a)	102 S.E. 13th Street Principal office address of limited liability of the control of the contro		_ (b)		Aailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
				PO Box 6	34
	Panora IA 50	216		Panora, I	A 50216
	05/11/2006			M0600000	02739
3.	Date of filing/registration in Flori	ida	4.		Document number
5. (a)	NRAI SERVICES, INC				
	Registered Agent and Registered Office shown on t	he records of th	e Florida I	Pept. of State	:
1200 South Pine Island Road					
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				FAS 2
					59 5
	Plantation	, FL_	50216		TILED PH 2: 55 SECRETARY OF STATE FALLAHASSEE FLORID
(b)	Corporation Service Company				PR 2
(0)	Enter name of NEW Registered Agent and/or NEV	V Registered C	office addr	ess:	2:
					35 S
	1201 Hays Street				
	NEW Registered Office Address:				
	- · · ·				
	Tallahassee	, FL	32301		
the cha agent v was/we the arti	imited liability company is not organized usinge or changes are made, the Florida street will be identical. Or, in the case of a Floride ere authorized by an affirmative vote of the icles of organization or the operating agreer	address of the alimited liab members of nent of the li	he registe pility con the limit	ered office pany, it is ed liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
Ciana	ture of a megibe) or authorized representative of a me		Jill Cil	mi, Author	ized Person
I here provisi the obl to mere notified	hy accept the appointment as registered age ions of all statutes relative to the proper and ligations of my position as registered agent ely reflect a change in the kegistered office din writing of this change	ent and agree d complete p as provided address, I he	erforman for in Ch ereby con	ace of my a apter 605, firm that t	Printed or typed name of signee acity. I further agree to comply with the luties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been by, Asst. Vice President
	Corporation Service C	Company	D I . Ola	CC E. KII	oy, Assi. vice i restuent

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