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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
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TALLAHASSEE, FLORIDA

14 OCT 27 PH 2: 51

NOV 0 7 2014 T. CARTER

LLC RA/Rochange



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: October 24, 2014

Order#: 346490-014

Re: ECBM, LLC

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: Morgan Kennedy

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

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

| 2. (a) | 15720 W. 108TH STREET | | (b) | | | |
|---------|--|-----------------------------|--------------------|--|-----------|--------------|
| | Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) | | | Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) | | |
| | LENEXA | KS 66219 | | | | |
| | 10/30/2006 | | MO | 6000006012 | | / |
| 3. | Date of filing/registr | ation in Florida | 4. | Document number | · | |
| 5. (a) | BATTING WILLIAM | | | | | |
| J. (a) | Registered Agent and Registered Of | Mice shown on the records o | f the Florida Dept | of State: | | |
| | 8040 OLD PALAFOX STRE | FT | | | | |
| | Registered Office Address (MUS | | ADDRESS) | | | |
| | · — | | | | | ΤAS |
| | | | | | • | LL/ ECR |
| | PENSACOLA | , F | L 32534 | | 007 | 一 年前 ・ |
| | | | | | 27 | SSE |
| (b) | Corporation Service Compa | | 1 Office addressed | | PH | 유민 |
| | Enter name of <u>NEW Registered Ag</u> | gent and/or NE.W Registere | ed Office address: | | <i>∴</i> | ES. |
| | 1201 Hays Street | | | | <u> </u> | ŽŽ. |
| | NEW Registered Office Address: | | | | - | A |
| | | | | | | |
| | | | | . | | |
| | Tallahassee | , F | L_32301 | | | |
| the cha | imited liability company is not ange or changes are made, the | Florida street address o | of the registered | e of Florida, it is hereby cond d office and the business offi ny, it is hereby confirmed th | ice of th | e registered |

Signature of a member or authorized representative of a member

Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent Corporation Service Company

BY:Grace E. Kirby, Asst. Vice President