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(City/State/Zip/Phone #)					
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Office Use Only



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FILEU SECRETARY OF STATE DIVISION OF CORPORATION

123914



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 llockar2@cscinfo.com

Date: December 17, 2014

Order#: 409832-107

Re: LP CR HOLDINGS, 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: 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.

2. (a)		(b)	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)) 	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	12201 Bluegrass Parkway		.	
	Louisville, KY 40299			
	07/31/2007		M070000	04551
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	C T Corporation System			_
	Registered Agent and Registered Office shown on the records	of the Florida	Dept, of Stat	e:
				_
	Registered Office Address (MUST BE FLORIDA STREE	<u>ET ADDRESS</u>	<u>)</u>	SE OLVIS 14 (
	1200 South Pine Island Road			- B
	Plantation	FL 33324		SECRETAR VISION OF C
				- - COR - F
(b)	Corporation Service Company			- R OR
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	red Office add	<u>lress</u> :	LEO STATE CORPORATIONS
	1201 Hays Street			9 *S
	NEW Registered Office Address:			-
				-
	Tallahassee	FL_32301		
the cha agent w was/we the arti	mited liability company is not organized under the nge or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the member cles of organization or the operating agreement of the company of the company of the operating agreement of the company of the operating agreement of the company of the company of the operating agreement of the company of the comp	of the regis l liability co s of the lim he limited l	tered office mpany, it i ited liabilit ability con	e and the business office of the registered s hereby confirmed that the change(s) y company or as otherwise provided in
_	ure of a camber or authorized representative of a member			Printed or typed name of signee
provision the oblit to mere	by accept the appointment as registered agent and a ons of all statutes relative to the proper and comple igations of my position as registered agent as provi ily reflect a change in the registered office address, I in writing of this change.	ngree to act ele performa ded for in C I hereby co	in this cap ince of my hapter 605 infirm that	acity. I further agree to comply with the duties, and I am familiar with and accept F.S. Or, if this document is being filed the limited liability company has been

Signature of Register Agent Corporation Service Company BY: Sylvia Queppet, Asst. Vice President