M0700000 5033

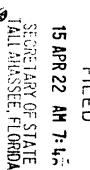
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(Address)					
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Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

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AFF 258 RIDE



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: April 20, 2015

Order#: 585935-002

Re: THEMVPSERVICE, 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.

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 Florida.

1. N	Name of the limited liability company:	BKMOJO, LLC					
2. (a)	1890 W CR 419 Ste 2010 Principal office address of limited lia (Note: MUST BE STREET A		_ (b)		. Riviera Boulevard Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	OVIEDO	FL 32765	 -	Oviedo, I	FL 32765		
	08/16/2007			M070000	05033		
3.	Date of filing/registration in	Florida	4.		Document number		
5. (a) INCORP SERVICES, INC						
`		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:					
17888 67TH COURT NORTH							
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	LOXAHATCHEE	, FL_	33470				
21.3	Comparation Santing Community						
(b) Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address:					-		
			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u> </u>			
	1201 Hays Street						
	NEW Registered Office Address:						
							
	Tallahassee	, FL_	32301				
the ch agent was/w	limited liability company is not organicange or changes are made, the Florida will be identical. Or, in the case of a Fivere authorized by an affirmative vote of ticles of any anization or the operating a	street address of the following street address of the members of	he registe pility con the limit	ered office npany, it is ed liability	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in		
	100		Dona	Priebe, A	uthorized Person		
Sign	aure a member of authorized representative	of a member			Printed or typed name of signee		
provis the ob to met	sions of all statutes relative to the prop ligations of my position as registered of rely reflect a change in the registered of edin writing of this change.	er and complete p	erforman	ice of my o	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		
Signa	Sylvin august of a	 	nw. c. i		and And Min Dun 11		
oignat	ure of Registered Agent Corporation Serv	ice Company	BY: Syl	via Quep	pet, Asst. Vice President		