## M07000005734

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Mary Rivers mary.rivers@cscglobal.com

Date: January 20, 2017

Order#: 473076-040

Re: TIC NASA BOULEVARD 20, 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: Mary Rivers 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	ame of the limited liability company: TIC NASA Boule	evard 20, LL	.c
2. (a)	101 N MAIN STREET, 12TH FLOOR	(b)	101 N MAIN STREET, 12TH FLOOR
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ ("/_	Mailing address of limited limbility company:  (Note: MAY BE POST OFFICE BOX)
	GREENVILEL, SC 29601		GREENVILLE, SC 29601
	<del></del>	<del></del> +	
	9/24/2007	M	107000005734
3.	Date of filing/registration in Florida	4.	Document number
5. (a	NRAI Services, Inc		
J. (a	Registered Agent and Registered Office shown on the records of t	the Florida Dep	pt, of State:
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)	MOICH OF T
	Plantation , FL	33324	
	•		——————————————————————————————————————
(b)	Corporation Service Company		<del></del>
	Enter name of NEW Registered Agent and/or NEW Registered	Office addres	g:
	4004 Nove Street		
	1201 Hays Street  NEW Registered Office Address:		
	11217 Registered Office Foldiess.		
		·	<del> </del>
	Tallahassee , FL	32301	
the chagent was/v	limited liability company is not organized under the law lange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia were authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	the register ability comp of the limited	red office and the business office of the registered pany, it is hereby confirmed that the change(s) d liability company or as otherwise provided in
		Paul Ge	etty, AUTHORIZED PERSON
•	ature of a member or authorized representative of a member		Printed or typed name of signee
I her provision the object of the me notification.	eby accept the appointment as registered agent and agricious of all statutes relative to the proper and complete biligations of my position as registered agent as provided rely reflect a change in the registered office address, I lead in writing of this change.	ee to act in performanc d for in Cha hereby confi	this capacity. I further agree to comply with the re of my duties, and I am familiar with and accept upter 605, F.S. Or, if this document is being filed from that the limited liability company has been
Signal	ure of Registered Agent Corporation Service Company	BY:GRAG	CE E. KIRBY, ASSISTANT VICE PRESIDENT

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