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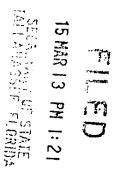
(Re	equestor's Name)			
(Ad	ldress)			
(Ad	dress)			
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nar	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				

Office Use Only



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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: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: March 10, 2015

Order#: 533254-002

Re: ASA KOHL'S SANFORD, 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.

(a)	.900 Fort Street Mall, Suite 1720	(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)
	Honolulu, HI 96813	-		
	11/15/2007	_	M070000	06743
	Date of filing/registration in Florida	4.		Document number
(a)	National Corporate Research, Ltd., Inc. Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of Stat	_ :e:
	155 Office Plaza Drive			_
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2	
				E. ca
	Tallahassee , FL	32301		S MAR
/L\	Corporation Service Company			
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	T P I
				~ (/·
	1201 Hays Street			T: 21
	NEW Registered Office Address:			- 5H -
				
	Tallahassee , FL	32301		_
cha ent v s/we	imited liability company is not organized under the law inge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lise are authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regi ability co f the lin	stered offic ompany, it i nited liabilit	e and the business office of the register is hereby confirmed that the change(s) ty company or as otherwise provided in
/s/ E	aston Manson	Eas	ton Manso	n, Authorized Person
Signa	ture of a member or authorized representative of a member	•		Printed or typed name of signee
	by accept the appointment as registered agent and agr ions of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I i	ee to ac	t in this cap	pacity. I further agree to comply with the

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