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(Re	questor's Name)						
(Ad	dress)						
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(City/State/Zip/Phone #)							
PICK-UP	☐ WAIT	MAIL					
(Bu	isiness Entity Nai	me)					
(Document Number)							
Certified Copies	_ Certificate:	s of Status					
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SEUNETARY OF STATE

K. SALY JAN 26 2017



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#: 473076-046

Re: TIC NASA BOULEVARD 23, 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.

ı.	Na	me of the limited liability company: TIC NASA Boule	evard 23	, LLC			
2.	(a)	101 N:MAIN STREET, 12TH FLOOR	ſЪ	101 N	N MAIN STREET, 12TH FLOOR		
	(-)	Principal office address of limited liability company:			Mailing address of limited liability company:		
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)		
		GREENVILEL, SC 29601 GREEN		GREENV	VILLE, 9C 29601		
3,		12/04/2007 Date of filing/registration in Florida	- 4.	M0700000	7033		
		<u> </u>	"	•			
5.	(a)	NRAI Services, Inc	L Et l'Ide	D- 4 - 65:-1			
		Registered Agent and Registered Office shown on the records of t	ile Fiorius	nebt of State:	سم	•	
		1200 South Pine Island Road			For E	<u>.</u>	
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			SLUKE JARY OF S	1 1 24 PM 56 0	
						2 T	
		Plantation , FL	33324		SS	<u>'</u> '	
		, increased the second	<u> </u>		Ma	PM	
(b)		Corporation Service Company			TIST	#	
	` '	Enter name of NEW Registered Agent and/or NEW Registered	Office add	iress:	3	30	
				•			
		1201 Hays Street	, , , , , , , , , , , , , , , , , , , 				
		NEW Registered Office Address:					
		Tallahassee ,FL	32301				
the ag- wa	e cha ent v is/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 lia ere authorized by an affirmant evote of the members of cless of organization or the manufacturing agreement of the	vs of the the regis ibility co f the lim limited l	State of Flor stered office impany, it is ited liability iability comp	and the business office of the reginereby confirmed that the change company or as otherwise provided pany.	stered (s)	
_	Ciona	ture of a member or authorized representative of a member	Pau		THORIZED PERSON		
I i pro the to no	herei ovisi e obl mere tifle	by accept the appointment as registered agent and agree of all statutes relative to the proper and complete igations of my position as registered agent as provided ely reflect a change in the registered office address, I have a change with the property of this change.		in this capa mce of my d hapter 605, onfirm that ti			
31	au	re of Registered Agent Corporation Service Company	o i . Ul	MUE E. M	RBY, ASSISTANT VICE PRESI	PENI	

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