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(Re	questor's Name)						
(Ad	dress)	<u>.</u>					
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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: Cassandra Neill cassandra.neill@cscglobal.com

Date: June 8, 2016

Order#: 161396-007

Re: EQUIAN, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Cassandra Neill 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. Na	me of the limited liability company: EQUIAN, LLC	·····					
2. (a)	5975 Castle Creek Pkwy	_ (b)				
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
	Indianapolis IN 46250	-					
	01/31/2008		M0800000	00518			
3.	Date of filing/registration in Florida	4.		Document nui	mbe	er	
5. (a)	C T CORPORATION SYSTEM						
, ,	Registered Agent and Registered Office shown on the records of the	e Florida	Dept. of State	:			
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address (MUST BE FLORIDA STREET A)	DDRESS	2	•			
						~ 2	
	PLANTATION , FL_	33324		7 m	VI Jacob	2015 UN	<u> </u>
(b)	Corporation Service Company			(A)	7) ≺	0	
	Enter name of NEW Registered Agent and/or NEW Registered C	Office add	dress:	, in .	Ds st	ά Ω	ED
	1201 Hays Street			Lorio	ŢΔ.	08	•
	NEW Registered Office Address:			>		œ.	
	Tallahassee FI	22204					
	, FL_	32301					
the cha agent w was/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited liab are authorized by an affirmative vote of the members of coles of agreement of the li	he regis pility co the lim	stered office mpany, it is ited liability	and the busing hereby confir company or a	ess me	office d that	of the registered the change(s)
		Don	a Priebe, Au	uthorized Pers	on		
Signa	ire of member or anthorized representative of a member			Printed or typed	nan	ne of sig	nee
provisi the obl to mere notifies	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I he in writing of this change.	erforma for in C ereby co	ance of my a Chapter 605, Onfirm that t	luties, and I an , F.S. Or, if th he limited liab	n fa is a pilit	imiliai locume y comp	with and accept ent is being filed pany has been
Signatu	re of Registered Agent Corporation Service Company	D1: U	iauc il. Nil	by, Asst. Vic	C P	reside	int

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