M08000000791

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							





600281914966

02/19/16--01021--012 **25.00

16 FEB 19 PHI2: 12
SECRETARY OF STATE

LEB 22 2016 J. HARRIS



CSC --WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: February 17, 2016

Order#: 980344-003

Re: A'GACI, L.L.C.

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: Janis M. Smith

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: A'GACI, L.L.C.						
2. (a)	12460 NETWORK BLVD, STE 106 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b)_	(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	SAN ANTONIO T> 78240	 					
	02/05/2008	1	M0800000	0791			
3.	Date of filing/registration in Florida	4.		Document numb	er		
5. (a	C T CORPORATION SYSTEM						
J. (u.	Registered Agent and Registered Office shown on the records of	the Florida D	ept. of State:				
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)					
					=1.0		
	PLANTATION , FL	33324			SECRET	6 FEB	ero grand
(b)	Corporation Service Company				ETAR)	9	ge received
(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	<u>ess</u> :) (전 (전 (전 (전 (전 (전 (전 (전 (전 (전 (전 (전 (전	P	151
					ی تنے	<u>iż</u>	U
	1201 Hays Street				DRID	12	
	NEW Registered Office Address:				>		
	Tallahassee , FL	32301					
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lie ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	f the registe ability com of the limite limited lial	red office a pany, it is led liability bility comp	and the business hereby confirme company or as o	office o	of the rate of the	egistered
Signa	ature of a member or authorized representative of a member			Printed or typed nan	ne of sign	ee	
provis the ob to mer notifie	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I is a fine writing of this change. The of Registered Agent Corporation Service Company	performan d for in Chi hereby conj	ce of my di apter 605, firm that th	city. I further ag uties, and I am fo F.S. Or, if this o ne limited liabilit y, Assistant Vi	amiliar v documer ty compo	with ai it is be any ha	with the nd accept ing filed s been

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

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: A'GACI, L.L.C.						
2. (a)	12460 NETWORK BLVD, STE 106	(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)				
	SAN ANTONIO T> 78240						
	02/05/2008	M08	3000000791				
3.	Date of filing/registration in Florida	4.	Document number ASS				
5. (a	C T CORPORATION SYSTEM						
5. (a)	Registered Agent and Registered Office shown on the records of	of State:					
	1200 SOUTH PINE ISLAND ROAD						
	Registered Office Address (MUST BE FLORIDA STREET)	PHIZ: 12					
	PLANTATION , FL	33324	2				
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address: 1201 Hays Street						
	NEW Registered Office Address:						
	Tallahassee, FL	, 32301					
the cl agent was/v	limited liability company is not organized under the landange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registered ability compar of the limited I limited liabili	l office and the business office of the registered ny, it is hereby confirmed that the change(s) iability company or as otherwise provided in				
Sign	nature of a member or authorized representative of a member		Printed or typed name of signee				
provi the oil to me notifi	eby accept the appointment as registered agent and agrisions of all statutes relative to the proper and complete bligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change. Ture of Registered Agent Corporation (Service Company	performance d for in Chapt hereby confirn	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept er 605, F.S. Or, if this document is being filed in that the limited liability company has been E. Kirby, Assistant Vice President				

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