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PICK-UP	☐ WAIT	MAIL			
(Bu	isiness Entity Nai	me)			
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Certified Copies	_ Certificate:	s of Status			
Special Instructions to Filing Officer:					
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Office Use Only



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D. BRUCE NOV 30 2016



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: November 23, 2016

Order#: 349105-008

Re: CENTERLINE DRIVERS, 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

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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: CENTERLINE D	RIVER	S, LLC	
2	(a)	1015 A Street	_ (b)	
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0		failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Tacoma W. 98402	_		
		04/15/2008	_	M0800000	01813
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	C T CORPORATION SYSTEM			
	(-)	Registered Agent and Registered Office shown on the records of t	he Florida	Dept. of State	:
		1200 SOUTH PINE ISLAND ROAD			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS	2	
		PLANTATION , FL	33324		2016 NOV SECRETA
	(b)	Corporation Service Company			NOV 28 P AHASSEE, FI
	(0)	Enter name of NEW Registered Agent and/or NEW Registered	Office ad	dress:	SEN SEN
					TA O
		1201 Hays Street			TORIO STATE TO TO
		NEW Registered Office Address:			Ou NDA
		Tallahassee , FL	32301		
the age	cha ent w s/w	imited liability company is not organized under the law nge 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 affirmative vote of the members of the operating agreement of the	the regist bility co	stered office ompany, it is lited liability	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in
	 ,	Xel C. Wille	Jill (Cilmi, Author	
I I pro the to i not	nerel ovisi obli mere tified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address. I have the proper acceptance of this change.	perform I for in (vereby c	ance of mŷ a Chapter 605, onfirm that t	luties, ånd I am familiar with and accept F.S. Or, if this document is being filed