M0800000370

(Rec	questor'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 F	Filing Officer:						





900277115159

09/18/15--01031--010 **25.00

2015 SEP 18 PH 3: 35

SEP 22 2015 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@cscgolbal.com

Date: September 16, 2015

Order#: 780076-042

Re: TRANSCORR, 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: 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.	Na	ame of the limited liability company: TRANSCORR,	LLC					
2.	(a)	4901 W. 96th Street	(b	3600 Woodview	v Trqce			
	(-/	Principal office address of limited liability company:		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
		(Note: MUST BE STREET ADDRESS)		(<u>/VOIE: /</u>	<u>MAI BE POST OF</u>	<u>FICE B</u>	<u>UX</u>)	
			_	Suite 300				
		Indianapolis IN 46268		Indianapolis	IN 46268		····	
		05/20/2008		M08000002370				
3.		Date of filing/registration in Florida	4.	Docume	ent number			
5.	(a)	NRAI Services, Inc						
	()	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:						
		1200 South Pine Island Road						
		Registered Office Address (MUST BE FLORIDA STREET A	ADDRESS	2				
						N 3		
					AG	2015	P*******	
		Plantation , FL	33324		ا برا مصر ریخ «تار ریخ «تار	23	i	
					T.S.	<u> </u>	Emmers. Amplicates	
	(b)				82	00		
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	Office add	iress:		35		
		1201 Have Street			20 ±	ယ္	47. BUNA	
		1201 Hays Street NEW Registered Office Address:			<u> </u>	<u> အ</u>		
					-			
		Tallahassee , FL	32301					
the ag wa	e cha ent v as/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 affirmative vote of the members of cles of organization or the operating agreement of the	the regisability co	tered office and the mpany, it is hereby ited liability compar	business office confirmed that t	of the i	registered nge(s)	
		0-6-	Don	a Priebe, Authorized	d Person			
	Signa	ture of a member or authorized representative of a member		Printed o	or typed name of sign	nee		
pr the to	ovisi e obl mere	by accept the appointment as registered agent and agrons 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 in writing of this change.	ee to act performe d for in C iereby co	in this capacity. I f unce of my duties, a Chapter 605, F.S. O onfirm that the limite	further agree to nd I am familiar r, if this docume ed liability comp	comply with a ent is be cany ha	with the nd accept sing filed as been	
		Drace Cokubie						
Si	gnatu	re of Registered Agent Corporation Service Company	BY: G	race E. Kirby, Ass	istant VP			

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