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MAY 27 2015

R. WHITE



SCSC - 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@cscqlobal.com

Date: May 19, 2015

Order#: 629372-002

Re: DUKE/HULFISH, 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.

OUCA.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:DUKE/HULFISH	I, LLC							_
2. (a)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 600 E. 96th St. Suite 100	(b)							- -
		Indianapolis IN 46240		Indianap	oolis, IN 462	40	<u> </u>			_
1		05/21/2008		M080000		1				-
3.		Date of filing/registration in Florida	4.		Document	numbe	r			
5. (a)	C T Corporation System Registered Agent and Registered Office shown on the records of the	ne Florida	Dept. of Sta	te:	**	- *1,2			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS		••••	·		ഗ		
		1200 South Pine Island Road		······································			<u> </u>	THE Y	717	
		Plantation , FL_	33324		_		9 19	~- ~>	* · · · ·	-
(b	-	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered C	Office add	ress:	_			TH 2: 05	œ ⁱ	.
		1201 Hays Street NEW Registered Office Address:			-					
		Tallahassee , FL	32301		_					
the care	har wer	mited liability company is not organized under the law- nge or changes are made, the Florida street address of t ill be identical. Or, in the case of a Florida limited lial re authorized by an affirmative vote of the members of the of organization or the operating agreement of the li-	the regis bility con the limi imited li	tered offic mpany, it i ted liabilit ability cor	e and the but is hereby conty ty company npany.	siness of as of	office of I that the therwise I	the rep	gistered e(s)	! -
I her provi the o to mo notif	reb sic bli ere ed	y accept the appointment as registered agent and agreems of all statutes relative to the proper and complete parties of all statutes relative to the proper and complete parties of the provided by reflect a change in the registered office address, I have a compact this change.				her agi I am fa f this d liability	ree to cor miliar wi ocument compan		ith the 'accepi g filed been	t

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