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PICK-UP	MAIT	MAIL	
(Bus	siness Entity Nan	ne)	
(Do	cument Number)		
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Certified Copies	Certificates of Status		
Special Instructions to I	Filing Officer:		
	JUL 23 2013		
	A. LUNT		

Office Use Only



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MULAHASSEE FLORIDS

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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: Evelyn Wright

Date: July 17, 2013

Order#: 714327-343

Re: GULF COAST FACILITIES, 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: Evelyn Wright

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

2013 JUL 22 AM II: ©

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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: GULF COAST F	ACILITIES, LLC		_
2. (a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	2 North Palafox Street Pensacola, FL 32502		_
(b)) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	2 North Palafox Street Pensacola, FL 32502	2013 JUL 22	PECTAL PROPERTY OF THE
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		4. Document number	F. 22	ţ.,
5. (a	Registered Agent and Registered Office shown on	he records of the Florida	건의 😅	
	Registered Agent:	Capitol Corporate Service	s, Inc.	
	Registered Office Address:	155 Office Plaza Dr., Suite Tallahassee, FL 32301	e A	_
	NEW Registered Agent:	Corporation Service Comp	oany	
	NEW Registered Office Address:	1201 Hays Street	······	_
	(MUST BE FLORIDA STREET ADDRESS)	Tallahassee	,FL <u>32301</u>	_
confi and the liabil the in the of	limited liability company is not organized under the rmed that after the change or changes are made, the F he business office of the registered agent will be ident ity company, it is hereby confirmed that the change(s) tembers of the limited liability company or as otherwiperating agreement of the limited liability company.	orida street address of the ical. Or, in the case of a I	registered office Florida limited	of
Printe	Priebe, Authorized Person d or typed name of signee	_		
I her comp and I Chap addre Corp By:	reby accept the appointment as registered agent and a ly with the provisions of all statules relative to the pri am familiar with and accept the obligations of my po ster 608, F.S. Or, if this document is being filed to me ess, I hereby confirm that the limited liability compan boration Service Company	gree to act in this capacit oper and complete perfori sition as registered agent rely reflect a change in th y has been notified in writ	y. I further agree in mance of my duties as provided for in he registered office ing of this change.	'o ,

Signature of Registered Agent Elizabeth A. Dawson, Asst. Vice President

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

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