6/16/2015 11:23:09 AM From: To: 8506176380(1/2) Division of Corporations ps://efile.sunbiz.org/scripts/efilcovr.exe

Florida Department of State

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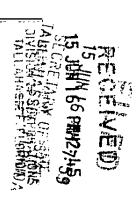
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JUN 1 7 2015

J SHIVERS

6/15/2015 11:23:09 AM From: To: 8506176380(2/2)

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.

2. (a)	200 International Circle #3500, Hunt Valley, MD 21030		(b) 200 II		, Hunt Valley, MD 21030
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			-	ited liability company: OST OFFICE BOX)
					
	11/7/2008		M08000	0004942	
3.	Date of filing/registration in Florida	4.		Document number	er ·
5. (a)	CORPORATION SERVICE COMPANY				
,	Registered Agent and Registered Office shown on the records of	State:			
	1201 HAYS STREET				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>\$\$)</u>		
	TALLAHASSEE ,,F	L_32301	-2525		\geq_{ω}
(b)	C T Corporation System				[[28] 15
(0)	Enter name of NEW Registered Agent and/or NEW Registere	d Office i	address:		
					SSE 16
	NEW Registered Office Address:				
	1200 South Pine Island Road		7: 59 31ATE LORIDA		
	Plantation . F	L ³³³²⁴			BH '호 >
the cha agent v was/wa	imited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited l ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registry of the li	gistered o company imited lia	office and the business, it is hereby confirme bility company or as o	office of the registered d that the change(s)
	17/2		nnifer Kur		
Signa	ture of a member or authorized representative of a member			Printed or typed nan	ne of signee
I here provisi the obi to mer notifie	by acceptine appointment as registered agent and agions of all statutes relative to the proper and completing at the proper and completing at the proper and completing at the proper agent as providely reflect a change in the registered office address, I din writing of this change.	ree to a e perfor ed for ir hereby	ict in this mance of h Chapter confirm	capacity. I further ag my duties, and I am fo 605, F.S. Or, if this o that the limited liabilit	ree to comply with the amiliar with and accept document is being filed ly company has been
By:	re of Registered Agent				
	tha Jones, Assistant Secretary, C T Corporation System				
	Division of Corporations • P.O. FILING I			ahassee, FL 32314	