Division of Corporations **Electronic Filing Cover Sheet**

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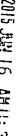
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6/16/2015 11:00:18 AM From: To: 8506176380(2/2)

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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

2. (a)	200 International Circle #3500, Hunt Valley, MD 21030		(b)	200 International Circle #3500, Hunt Valley, MD 21030			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		<u> </u>					
	11/7/2008		λ	108000004	1962		
3.	Date of filing/registration in Florida	4.			Document number		
5. (a)	CORPORATION SERVICE COMPANY						
, (-)	Registered Agent and Registered Office shown on the records of	the Flori	da I	Ocpt. of Stat	te:		
	1201 HAYS STREET						
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>55)</u>			- 1	~ 3
						14m C.	
	TALLAHASSEE ,F	L_32301	-25	25	_		2015 JUN 16
	C T Corporation System					83	16
(b)	Enter name of NEW Registered Agent and/or NEW Registere	d Office :	ıddı	'ess:	-		-
							AM II: 4
							٠٠
	NEW Registered Office Address:				_	(California)	£.
	1200 South Pine Island Road				- ·		
	Plantation	L ³³³²⁴					
		**			-		_
the cha agent v was/we	imited liability company is not organized under the la ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited le ere authorized by an affirmative vote of the members	f the repliability of the li	gist con imit	ered offic npany, it i led liabilit	e and the business of is hereby confirmed ty company or as other	ffice of the that the cha	registered nge(s)
the arti	cles of organization or the operating agreement of the	e limite	d lia	ability cor er Kurz	mpany.	·	
Signa	ture of a member or authorized representative of a member	<u> </u>	111111	CI RUIZ	Printed or typed name	ofsignee	
I here provisi the obt to mer notifled	by acceptine appointment as registered agent and ag ions of all statutes relative to the proper and complet ligations of my position as registered agent as provid ely reflect a change in the registered office address, i d in writing of this change.	ree to d e perfor ed for it hereby	nct i ma i Ci coi	n this cap nce of my hapter 60 nfirm that	pacity. I further agriduties, and I am fai duties, and I am fai 5, F.S. Or, if this do the limited liability	ee to comply niliar with a ocument is b company ho	with the and accept eing filed as been
By:	re of Registered Agent						
	the or Registered Agent tha Jones, Assistant Secretary, C T Corporation System						
	Division of Corporations P.O. FILING 1				ssee, FL 32314		