M09000116

(Re	questor's Name)				
· (Ad	dress)				
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(Cit	y/State/Zip/Phone	; #)			
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(Bu	siness Entity Nan	ne)			
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SECRETARY OF STATE FALLAHASSEE. FLORIDA

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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: Janis M. Smith janis.smith@cscinfo.com

Date: March 19, 2015

Order#: 535517-014

Re: CGI MERCHANT CAPITAL, 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.

2. (a) _	(a) 801 Brickell Avenue Suite 700 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)_	(b) 1395 Brickell Avenue, Suite 800		
				Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	MIAMI	FL 33131		Miami, FL 33131		
	03/23/2009		<u>N</u>	109000001116		
3.	Date of filing/regi	stration in Florida	4.	Document num	ber	
· (a)	Mark Scott					
(a)	Registered Agent and Registered	Office shown on the records	of the Florida De	pt, of State:		
	_			•		
	200 S. BISCAYNE BOUL Registered Office Address		T ADDRECO			
	Registered Office Address <u>III.</u>	IUSI BE FLURIDA SI KEE	I ADDRESS)			
						
	МІАМІ	_ 1	FL 33131		15 15	
		······································	<u> </u>			
(b)	Corporation Service Com	panv			HAR CRET	
	Enter name of NEW Registered		red Office addres	<u>ss</u> :	24 I	
					PM FE	
	1201 Hays Street				F ST FLC	
	NEW Registered Office Address	S:			2: 10 STATE -LORIDA	
	Tailahassee	,1	FL_32301			
he chai agent w was/we	mited liability company is a nge or changes are made, the rill be identical. Or, in the re authorized by an affirma	not organized under the ne Florida street address case of a Florida limited tive vote of the member	laws of the Sta of the register liability comp s of the limite	red office and the busine bany, it is hereby confirn d liability company or as	ss office of the registered ned that the change(s)	
ne artic	cles of organization or the o	operating agreement of the				
Sim I	ore if a member or authorized re	presentative of a member	Dona F	Priebe, Authorized Perso Printed or typed n		
provisio	by accept the appointment of all statutes relative to	is registered agent and a o the proper and comple	ete pertormano	this capacity. I further to see of my duties, and I am	agree to comply with the	