M09000001664

(Requestor's Name)							
(Address)							
(Address)							
	(City/State/Zip/Phone #)						
PICK-U	P WAIT MAIL						
(Business Entity Name)							
(Document Number)							
Certified Copies	Certificates of Status						
Special Instructions to Filing Officer:							

Office Use Only



300273287463

05/28/15--01028--001 **25.00

JUN 5 2015 C LEWIS



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington
B00-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: May 26, 2015

Order#: 623928-059

Re: SKIP PROS, 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.

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	(0)	440 Metropley Drive	(h	`		
۷.	(a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		Nashville TN 37211				
		05/04/2009		M090000	01664	
3.		Date of filing/registration in Florida	4.		Document number	
5.	(a)	C T CORPORATION SYSTEM				
	(-)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
		1200 SOUTH PINE ISLAND ROAD				
		Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS	2		
					5 %	
		PLANTATION, I	FL <u>33324</u>	ļ	15 MAY 2	
	(b)	Corporation Service Company			- 8 37 6 7 6 7 6 7 6 7 7 6 7 7 6 7 7 6 7	
	Enter name of NEW Registered Agent and/or NEW Registered (dress:	6. 5.	
		1201 Hays Street			一 6	
		NEW Registered Office Address:			-	
					••	
		Tallahassee , 1	FL <u>32301</u>		_	
the ag wa	e cha ent v is/w	limited liability company is not organized under the ange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member icles of organization or the operating agreement of the partie of a member or authorized representative of a member	of the regis liability cos s of the lim he limited l	stered offic ompany, it in hited liability con liability con	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
pr the to	iere ovisi e obi mer	by accept the appointment as registered agent and a ions of all statutes relative to the proper and completing agent as provided in the proper and completing agent as provided in the registered office address, and in writing of this change.	agree to act ete perform ded for in (I hereby co	t in this cap ance of my Chapter 60 onfirm that	pacity. I further garee to comply with the	
Si	gnati	ire of Registered Agent Corporation Service Company	y BY: S	ylvia Que _l	opet, Asst. Vice President	

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