M10000001102

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

Office Use Only



600288871276

08/29/16--01028--020 **25.00



AUG 3 0 2016

Y SULKER

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.

1.	Na	me of the limited liability company: KCE CHAMPION	NS LLC		
2.	(a)	650 NE HOLLADAY STREET SUITE 1400 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(b))	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		PORTLAND, OR 97232	-		1.11
_		03/09/2010	_	M1000000	· · · · · · · · · · · · · · · · · · ·
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	ne Florida	Dept. of State	:
		1200 SOUTH PINE ISLAND ROAD			
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
					16
		PLANTATION , FL	33324		AUG.
	(b)	Corporation Service Company			in the second se
	(0)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	ress:	FLORES FOR
		1201 Hays Street			29 PH 2: 01
		NEW Registered Office Address:			
		,			
		Tallahassee , FL	32301		
the age	cha ent w s/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization or the operating agreement of the liable.	the regis bility co the limi imited li	tered office mpany, it is ited liability ability com	and the business office of the registered hereby confirmed that the change(s) company or as otherwise provided in pany.
	Signat	are of a member or authorized representative of a member	Jill C	ilmi, Author	rized Person Printed or typed name of signee
II pre the to no	nerel ovisi obli mere tified	by accept the appointment as registered agent and agreous of all statutes relative to the proper and complete prigations of my provided agent as provided by reflect a change in the registered office address, I have the proper address, I have the proper of this change.	performa for in C ereby co	ince of my a hapter 605, infirm that t	ncity. I further garge to comply with the

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25,00

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.

1.	Na	me of the limited liability company: KCE CHAMPION	IS LLC			
2.	(a)	650 NE HOLLADAY STREET SUITE 1400 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b))		nited liability company: OST OFFICE BOX)
		PORTLAND, OR 97232	- -			
		03/09/2010	_	M1000000)1102	
3.		Date of filing/registration in Florida	4.]	Document number	er
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 STREET A	DDRESS	<u> </u>		
		PLANTATION, FL_	33324			<u>.</u>
						5
	(b)	Corporation Service Company	N 400 N			3
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	office add	lress:		SE 50 11
		1201 Hove Street				
		1201 Hays Street NEW Registered Office Address:		• • • • • • • • • • • • • • • • • • • •		70 70
						EH 2:01
						<u>→</u>
		Tallahassee FL.	32301			
		, FL_	32301			
the ag wa	e cha ent v is/we	mited liability company is not organized under the lawinge or changes are made, the Florida street address of to vill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cless of organization or the operating agreement of the liable.	he regis pility co the lim	tered office mpany, it is ited liability	and the business hereby confirme company or as o	office of the registered d that the change(s)
		Xel E. Whee	Jill C		ized Person	
I ; pr the to	herel ovisi e obl mere	the of a member or authorized representative of a member by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address, I have the proper and complete by reflect a change in the registered office address, I have the proper and the proper	e to act performa for in C ereby co	in this capa	Printed or typed nan acity. I further ag luties, and I am fo F.S. Or, if this o he limited liabilit	ree to comply with the
Si	gnatu	re of Registered Agent Corporation Service Company	BY: G	race E. Kirl	by, Asst. Vice P	President

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



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Tecora Bell tecora.bell@cscglobal.com

Date: August 25, 2016

Order#: 258863-031

Re: KCE CHAMPIONS 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: Tecora Bell 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