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

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TALLAHASSEE FLORID

FEB 17 2015 T. CARTER



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ben Beaver bbeaver@cscinfo.com

Date: February 10, 2015

Order#: 485261-010

Re: OPUS CAPITAL MARKETS CONSULTANTS, 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: Ben Beaver 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.

1.	Na	me of the limited liability company: OPUS CAPITAL	. MARKE	ETS CONS	ULTANTS, LLC			
2.	(a)	100 Tristate International Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (b)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		STE 300A			(Note: MAT BE LOST OF	TICE B	<u> </u>	
		Lincolnshire, IL 60069	_					
		07/28/2010		M100000	03347			
3.		Date of filing/registration in Florida	4.		Document number			
5.	(a)	NRAI Services, Inc.						
	` '	Registered Agent and Registered Office shown on the records of the	he Florida	Dept. of State	- e:			
		1200 South Pine Island Road						
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			-			
							₹.,	
					-	Ω1	VLT. SEC	
		Plantation , FL	33324		-	Æ	£R	
						2	ASS FIL	
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered 4	Office add	ł mass :	_	PΗ		
		Enter hame of NEW Registered Agent and of NEW Registered	Office auc	<u> </u>		# 2:		
		1201 Hays Street				÷.	OR OR	
		NEW Registered Office Address:			-	£	₽m	
		-			-			
		Tallahassee, FL_	32301		_			
the ag wa	e cha ent w is/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cles of organization or the operating agreement of the l	the regis bility co f the lim	tered office mpany, it is ited liability	e and the business office s hereby confirmed that to y company or as otherwi	of the the the	registered	
		000	Don	a Priebe, A	uthorized Person			
	-	ure of a member or authorized representative of a member			Printed or typed name of sig			
I i pro the to no	ujieg	by accept the appointment as registered agent and agreens of all statutes relative to the proper and complete pations of my position as registered agent as provided by reflect a change in the registered office address, I have in writing of this change.	ee to act performa I for in C vereby co	in this cape ance of my c hapter 605 onfirm that i	acity. I further agree to duties, and I am familiar , F.S. Or, if this docume the limited liability comp	comply with a nt is be cany ha	with the nd accept eing filed is been	
Si	enatur	e of Registered Agent Corporation Service Company	RV. C.	dvia Ones	net Assistant Vice Dro	scidon+		
~	ə	Corporation Service Company	D1.3	rvia Quep	pet, Assistant Vice Pre	sident		