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(Requestor's Name)						
(Address)						
(Ad	ldress)					
(Cit	ty/State/Zip/Phon	e #)				
PICK-UP	☐ WAIT	. MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate	Certificates of Status				
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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: Grace Kirby gkirby3@cscinfo.com

Date: August 5, 2014

Order#: 244210-002

Re: CIRRUS HOLDINGS USA, 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: Grace Kirby

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.

	Name of the limited liability company: CIRRUS HOLDIN		220 5 1	Acreh and Chanal Co	200
2. (a)	309 E. Morehead Street, Suite 200 Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b) 309 E. Morehead Street, Suite 200 Mailing address of limited liability (Note: MAY BE POST OFFICE)		
			2nd Floor		
	Charlotte, NC 28202 95403		Charlotte,	NC 28202	
	10/26/2010		M1000000	4723	
3.	Date of filing/registration in Florida	4.	İ	Document number	
5. (a)	C T Corporation System			•	
	Registered Agent and Registered Office shown on the records of t	he Florida D	ept. of State:		~ ~ ~
	1200 South Pine Island Road				LC P
	Registered Office Address (MUST BE FLORIDA STREET A	(DDRESS)			FII UG -T RETAI AHAS
	Plantation , FL	33324			FILED AUG -7 PH 12: 02 SECRETARY OF STATE ALLAHASSEE, FLORI
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	Office addre	<u>:ss</u> :		02 FATE ORIDA
	1201 Hays Street				•
	NEW Registered Office Address:				
Ì	Tallahassee	32301			
the chagent was/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	vs of the St the registe ability com f the limite	red office pany, it is ed liability	and the business of hereby confirmed to company or as oth	ffice of the registered that the change(s)
			Wil	LLIAM OTTI	GER
I here provis the ob to mer	the first member or authorized representative of a member by accept the appointment as registered agent and agree on sof all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	ee to act in performan I for in Ch iereby con	thic cana	Printed or typed name of city. I further agre- uities, and I am fam F.S. Or, if this doc he limited liability of	e to comply with the
Signati	Thorage Company of Registered Agent Corporation Service Company	BY: Gra	ce E. Kirl	oy, Asst. VP	
	Division of Corporations P.O. B	ox 6327•	Tallahass	ee, FL 32314	

FILING FEE: \$25.00