## M11000001040

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

Office Use Only



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05/12/17--01022--024 \*\*25.00

TO NEXT 12 TH & 17

M. MILLIGAN NAY 1 6 2017



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: May 10, 2017

Order#: 635927-025

Re: PVL TENANT - BC, 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: Ami Casper

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: PVL TENANT -	BC, LLC		
2.	(a)	1630 Des Peres Road, Suite 310	(l	o)	
		Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		St. Louis, MO 63131	_		
		02/25/2011		M110	00001040
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	C T Corporation System			
J. (u	()	Registered Agent and Registered Office shown on the records of t		a Dept. of	State:
		1200 South Pine Island Road			ين المسلم
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			
					A SEC
					<del>-</del> - 2 <b>**</b> ********************************
		Plantation , FL	33324	<u> </u>	<u> </u>
(b)					
	(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	Office ad	deara	<del>-</del> - 중류
		Their name of NEW Registered Agent and/or NEW Registered	Villee au	<u>uress</u> .	77
		1201 Hays Street			
		NEW Registered Office Address:			
		Tollehanne	20204		
		Tallahassee , FL	32301		<del></del>
the age wa	cha ent w s/we	mited liability company is not organized under the law nge or changes are made, the Florida street address of zill be identical. Or, in the case of a Florida limited lia- ter authorized by an affirmative vote of the members of cles of organization or the operating agreement of the	the reginability confirmed the line	stered of ompany, nited lial	ffice and the business office of the registered it is hereby confirmed that the change(s) bility company or as otherwise provided in
	/s/ T:	racy W. Carte	Tra	cy W. Ca	arte, Authorized Person
S	ignat	ure of a member or authorized representative of a member			Printed or typed name of signee
pro the to not	ovisie obli mere tified	by accept the appointment as registered agent and agrows of all statutes relative to the proper and complete igations of my position as registered agent as provided by reflect a change in the registered office address, I have the change of this change.	perform d for in ( iereby c	ance of Chapter onfirm t	my duties, and I am familiar with and accept 605, F.S. Or, if this document is being filed hat the limited liability company has been
Sig	gnatui	re of Registered Agent Corporation Service Company			Casper, Asst. Vice President