M11000001413

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

Office Use Only



800250216378

08/05/13--01034 -029 **25.00

FILED
2013 AUG -5 PM 3: 22
SECRETARY OF STATE
AND ANASSEL, FLORIDI

B. BOSTICK AUG - **6** 2013

EXAMINER



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Smetana

Date: August 1, 2013

Order#: 736847-014

Re: ANSON STREET 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: Alex Smetana

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

2013 AUG -5 PM 3: 22
SEURETARY OF TALE
TALLAHASSEL, FLORID

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: ANSON STR	EET LLC	
2. (a) Principal office address of limited liability comp. (<i>Note: MUST BE STREET ADDRESS</i>)	any: 625 Pilot Road Suite 4 Las Vegas, NV 89119	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	625 Pilot Road Suite 4 Las Vegas, NV 89119	
03/22/2011	M11000001473	
3. Date of filing/registration in Florida	4. Document number	•
5. (a) Registered Agent and Registered Office shown of	on the records of the Florid	da Dept. of State:
Registered Agent:	C T Corporation System	n
Registered Office Address:	1200 South Pine Island Plantation, FL 33324	A Co
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u>	-	
NEW Registered Agent:	Corporation Service Co	ompañy 3
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	3. 2
(MOST DE LEGRENASTREET ADDRESS)	Tallahassee	FL 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	e Florida street address of entical. Or, in the case of e(s) was/were authorized b wise provided in the artic	the registered office a Florida limited by an affirmative vote of
Dona Priebe, Authorized Person Printed or typed name of signee		
I hereby accept the appointment as registered agent an comply with the provisions of all statules relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability comp	d agree to act in this capa proper and complete perf position as registered age merely reflect a change in any has been notified in w	city. I further agree to ormance of my duties, ent as provided for in the registered office vriting of this change.
By: Signature of Registered Agent Corporation Service Company	Grace E. Kirby, Asst.	VP

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