## M11000001967

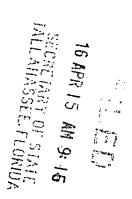
	•				
(Requestor's Name)					
(Address)					
,					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
·	•	·			
(Document Number)					
(DC	icannent Namber)				
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					





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APR 19 2016 J SHIVERS



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 grace.kirby@cscglobal.com

Date: April 13, 2016

Order#: 087781-004

Re: CS CWR HOLDINGS 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.

1.	Na	me of the limited liability company: CS CWR HOLDI	NGS LL	<u> </u>	
2	(2)	39 Patton Avenue	_ (b)	One Va	nce Gap Road
۷,	(4)	Principal office address of limited liability company:	_ (0)		Mailing address of limited liability company:
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)
				Attn: Leg	al Dent
			_	Attil. Leg	а вери
		Asheville NC 28801	_	<u>Asheville</u>	, NC 28805
		04/19/2011	_	M1100000	01967
3.		Date of filing/registration in Florida	4.	•	Document number
_		NDALC			
5.	(a)	NRAI Services, Inc.	o Florida	Dont of State	
		Registered Agent and Registered Office shown on the records of the	ie riorida	Dept. of State	:
1200 South Pine Island Road					
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)		
		Plantation , FL_	33324		$\geq g$
	(b)	Corporation Service Company			APR NEW NORTH
(-)		Enter name of NEW Registered Agent and/or NEW Registered Office address:		- CO	
					Sign of the sign o
		1201 Hays Street			
		NEW Registered Office Address:			5 yo
					50 m
		Tallahassee FL	32301		
		, 10_			•
If	the li	mited liability company is not organized under the law	s of the	State of Flo	orida, it is hereby confirmed that after
		nge or changes are made, the Florida street address of t vill be identical. Or, in the case of a Florida limited lial			
ag Wa	as/we	re authorized by an affirmative vote of the members of	the limi	npany, it is ted liability	company or as otherwise provided in
th	e ark	cles of organization or the operating agreement of the l	imited li	ability com	npany.
	/	Viel & GOME	Jill C	ilmi. Autho	rized Person
_	Signa	are of a member or authorized representative of a member		,	Printed or typed name of signee
I	hekei	by accept the appointment as registered agent and agre	e to act	in this capa	acity. I further agree to comply with the
pr	oviși	ons of all statutes relative to the proper and complete p	performa	nce of my	duties, and I am familiar with and accept
to	e ooi mere	ons of all statules relative to the proper and complete p igations of my position as registered agent as provided ly reflect a change in the registered office address, I he	jor in C ereby co	napier 603 nfirm that i	, r.s. Or, ij inis aocument is being filed the limited liability company has been
no	otified	in writing of this change.	, -	•	
_		es tokubly			
Si	ignatu	re of Registered Agent Corporation Service Company	BY: G	ace E. Kir	by, Asst. Vice President