Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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LLC REGISTERED AGENT CHANGE NORTRU, LLC

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6/30/2014

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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. 2. (i		me of the limited liability company: 5151 SAN FELIPE, SUITE 1600 Principal office address of limited liability company:	_ (b) .	28/4	28/61 N. KEITH BL. Mailing address of limited liability company:					
		(Note: MUST BE STREET ADDRESS) HOUSTON, TX 77056	_	-	LAKE				ST OFFICE		
		10/11/2011	-	<u>M</u>	11 100000	5073					
3.		Date of filing/registration in Florida	4,			Docu	nent 1	umbei	r		
5. ((a)	CORPORATION SERVICE COMPANY				_					
		Registered Agent and Registered Office shown on the records of the 1201 HAYS STREET	te Florie	sa L	ept. of Sta	ie:					
		Registered Office Address MUST BE FLORIDA STREET A	DDRE!	ফ্র		_					
		TAIT ATTACRDE	22201			-				ن دسه	
		TALLAHASSEE FL.	32301			-				يي	-17
((b)	C T Corporation System								UN 3	7
•	,	Enter name of NEW Registered Agent and/or NEW Registered	Office	dd	1288	_			٠.	0	įΠ
									<i>;</i>	12	0
		NEW Registered Office Address:				-				ယ္	
		1200 South Pine Island Road			_ _	_				29	
		Plantation , FL	33324			_					
the age was	cha nt v s/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 liate authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the rep bility f the li	gist co: imi	ered office npany, it ted ligbil	ce and t is herei ity com	he bu by cor pany (siness nirme or as o	office of the d	he regis :hange(rovided	stered s) l in
		sure of a member or authorized representative of a member	-				SO OF TY	pe	·· · · · · · · · · ·	·· 	_
I h pro the to n not CT By:	ere visi obi ner ifte Co	by accept the appointment as registered agent and agr ions of 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 d in writing of this change. Megan I Megan Assistant and Registred Agent	ee to a perfor if for in itereby Morris Secre	ict ma i C co con tar	in this co nce of my hapter 60 nfirm tha y	pacity. V duties 05, F.S. It the lin	l furt , and Or, i nited i	her ag l am fa l this a liabilit	ree to com miliar wit locument i ly company	ply with h and a s being has be	h the rccept filed een

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