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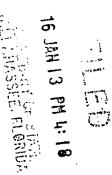
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CSC - WILMINGTON Suite 400 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard lindsey.lockard@cscglobal.com

Date: January 11, 2016

Order#: 911806-218

Re: G&E APPRAISAL SERVICES, 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: Lindsey Lockard

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: G&E APPRA	SAL SERVICE	S, LLC
2. (a)	499 Park Avenue	(b)	
	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	New York N\ 10022		
	05/02/2012	M1	12000002433
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 the Florida Dept	t. of State:
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	<del></del>
	PLANTATION	DI 22224	
	PLANTATION , 1	FL 33324	
(b)	Corporation Service Company		
(5)	Enter name of NEW Registered Agent and/or NEW Register	ed Office address	in the second se
			Sign w
	1201 Hays Street		
	NEW Registered Office Address:		
			•
	Tallahassee ,	FL 32301	
10.1		laura a Calaa Caaa	a of Florida it is housely confirmed that after
the cha	imited liability company is not organized under the ange or changes are made, the Florida street address	of the registere	d office and the business office of the registered
agent v	will be identical. Or, in the case of a Florida limited ere authorized by an affirmative vote of the member	liability compa	any, it is hereby confirmed that the change(s)
the art	icles of organization or the operating agreement of t	he limited liabil	lity company.
,		Dona Pr	riebe, Authorized Person
Signa	tus of a member or authorized representative of a member		Printed or typed name of signee
I here	by accept the appointment as registered agent and a ions of all statutes relative to the proper and comple	ngree to act in t ete performance	his capacity. I further agree to comply with the e of my duties, and I am familiar with and accept
the oh		dod for in Char	otar 605 E.C. On if this document is haire filed
to mer	ligations of my position as registered agent as provi ely reflect a change in the registered office address.	aea jor in Chap I hereby confir	rm that the limited liability company has been
to mer notifie	ions of all statutes relative to the proper and completions of my position as registered agent as proviety reflect a change in the registered office address, din writing of this change.	aea jor in Chap I hereby confir	m that the limited liability company has been

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	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
	New York	N\ 10022				
	05/02/2012	<del></del>	<u>M</u> 1	12000002433		
3.	Date of filing/reg	istration in Florida	4.	Document numb	er	
5. (a)	C T CORPORATION S	SYSTEM				
- (-)	Registered Agent and Registere		of the Florida Dept	t. of State:		
	1200 SOUTH PINE ISL	AND ROAD				
		MUST BE FLORIDA STREE	T ADDRESS)		<b>3. 3</b>	•
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	***************************************			<del> </del>		14.7
(b)	Corporation Service Con	npany				
` '	Enter name of NEW Registere	d Agent and/or NEW Register	red Office address:	<del></del> :		** 1
					Si u	>
	1201 Hays Street					
	NEW Registered Office Addre	SS:	<u></u>			
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	Tallahassee		mr 20004			
	1 dii di lassee		FL 32301			
f the l	imited liability company is	not organized under the	laws of the State	e of Florida, it is hereby	confirmed t	nat after
he ch	ange or changes are made, i	the Florida street address	of the registered	d office and the business	office of th	e registere
ıgeni vas/w	will be identical. Or, in the ere authorized by an affirm	case of a Florida limited	liability compa	ny, it is hereby confirme liability company or as o	ed that the ch	nange(s)
he art	icles of organization or the	operating agreement of t	he limited liabil	ity company.	offici wise pr	DVIGCG III
j		<del>=</del>	Dona Pri	iebe, Authorized Person		
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provis he obl o mer	by accept the appointment ions of all statutes relative ligations of my position as ely reflect a change in the d in writing of this change.	to the proper and comple	te pertormance	of my duties and I am to	amiliar with	and accer
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Signati	ire di Registered Agent Corpor	ation Commission	. DV. Culuio	Overnot Aget Vice I	Dussidant	

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