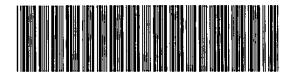
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(Requestor's Name)						
(Address)						
(Address)						
(City	//State/Zip/Phone	e #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
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2016 OCT -7 PM 12: 25

K. SALY OCT 1 0 2016



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: October 5, 2016

Order#: 312430-015

Re: INTERDOM 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: Janis M. Smith 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.

	ame of the limited liability co				
2. (a)		f limited liability company: STREET ADDRESS)	(b)	3006	Sunset Landing Drive Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Jacksonville	FL 32226		Jackson	nville, FL 32226
	06/27/2012			M12000	003649
3.	Date of filing/regis	tration in Florida	4.		Document number
5. (a)	C T Corporation System				
J. (u)	Registered Agent and Registered		the Florida	Dept. of Sta	 ate:
	1200 South Pine Island R	nad			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)			_	
	-				
	Plantation	, FL	33324		2016 OCT - 7 PH 12: 25 TALLAHASSEE FLORIDA
(b)	Corporation Service Comp	nany			75
(0)	Enter name of NEW Registered		Office add	ress:	
					PH Z
	1201 Hays Street				1.00
	NEW Registered Office Address				RIDE
	Tallahassee		22201		_
	Tallatiassee	, FL	32301		_
the cha agent v was/w	ange or changes are made, the will be identical. Or, in the c	e Florida street address of ase of a Florida limited li live vote of the members of perating agreement of the	f the regis ability co of the limi limited li	tered office mpany, it ted liabili ability co	lorida, it is hereby confirmed that after ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany. Porized Person
Signa	ture of a member or authorized rep	resentative of a member			Printed or typed name of signee
provisi the obl to mer notified	by accept the appointment as ions of all statutes relative to ligations of my position as reely reflect a change in the red in writing of this change.	o the proper and complete gistered agent as provide gistered office address, I	performa d for in C hereby co	nce of my hapter 60 nfirm tha	pacity. I further agree to comply with the values, and I am familiar with and accept 05, F.S. Or, if this document is being filed the limited liability company has been irby, Assistant Vice President
	Th: ::	66 4 00	D	75 11 1	. III 20244