#1112000005445

(Re	questor's Name)	
(Ad	dress)	,
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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K.SALY EXAMINER FEB 1 2 2014



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 llockar2@cscinfo.com

Date: February 7, 2014

Order#: 964044-052

Re: THE J.R. CLARKSON COMPANY LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \overline{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, 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.

out, in the state by 1 to rad,		
1. Name of the limited liability company: THE J.R. CLAF	RKSON COMPANY LLC	- <u></u>
2. (a) Principal office address of limited liability compar	ny: 10707 CLAY ROAD SUITE	200
(Note: MUST BE STREET ADDRESS)	HOUSTON	T> 77041
(b) Mailing address of limited liability company:	5500 Wayzata Boulevard,	Suite 800
(Note: MAY BE POST OFFICE BOX)	Golden Valley, MN 55416	The state of the s
09/27/2012	M12000005445	表立
3. Date of filing/registration in Florida	4. Document number	Chor 1
5. (a) Registered Agent and Registered Office shown on	the records of the Florida I	Dept. of Significant
Registered Agent:	C T CORPORATION SYS	- 1·
Registered Office Address:	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION	FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>		
NEW Registered Agent:	Corporation Service Compa	any
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
(MOST DE L'EURIDA STREET ADDRESS)	Tallahassee	,FL_32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the I and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherw the operating agreement of the limited liability company. Signature of a member or authorized representative of a member	Florida street address of the itical. Or, in the case of a Fl s) was/were authorized by a	registered office lorida limited n affirmative vote of
Dona Priebe, Authorized Person		
Printed or typed name of signee		
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the plant I am familiar with and accept the obligations of my plant of the p	agree to act in this capacity roper and complete perform osition as registered agent t erely reflect a change in the ny has been notified in writi	. I further agree to nance of my duties, as provided for in registered office ng of this change.
Signature of Registered Agent Corporation Service Company	Sylvia Queppet, Assistant	Vice President

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