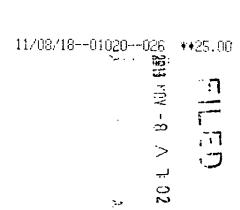
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(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
Certified Copies	. Certificates	s of Status
Special Instructions to F	Filing Officer:	

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ulalia



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Baronie lindsey.baronie@cscglobal.com-

Date: November 6, 2018

Order#: 427485-078

Re: CETERA INVESTMENT MANAGEMENT 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 Baronie c/o Corporation Service Company 251 Little Falls Drive 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.

OUCA.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 company: CETERA INVE	STMENT MANA	GEMENT LLC
2. ·(a)	200 N SEPULVEDA BLVD, STE. 1200	(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)
	EL SEGUNDO C/ 90245		
	04/15/2013	M130	00002358
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T CORPORATION SYSTEM		
, ,	Registered Agent and Registered Office shown on the records of	fthe Florida Dept. of	State:
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address	ADDRESS)	1
	PLANTATION .FI	. 33324	
(b)	Corporation Service Company Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office address:	02 —
	1201 Hays Street		
	NEW Registered Office Address:		
	Tallahassa	22204	
	Tallahassee . FI	32301	<u> </u>
the cha agent v was/w	imited liability company is not organized under the la enge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	f the registered of iability company, of the limited liab	ffice and the business office of the registered it is hereby confirmed that the change(s) bility company or as otherwise provided in
	iture of a member or authorized representative of a member	Jill Cilmi, Au	uthorized Person
			Printed or typed name of signee
попріє	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide elvreflect a change in the registered office address, I d'in writing of this change.	ree to act in this (e) performance of sed for in Chapter hereby confirm to	capacity. I further agree to comply with the my duties, and I am familiar with and accept 605. F.S. Or, if this document is being filed hat the limited liability company has been
Signatu	Amore M. Baronie me of Registered Agent Corporation Service Company	BY: Lindsey l	M. Baronie, Asst. Vice President