M13000002952

(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Dusiness Entity Name)				
(Document Number)				
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JORETARY OF STATE

FEB 23 2016

3 MASON

COVER LETTER

Division of Corporations							
FILE & SERVEXPRESS, L SUBJECT:	LC						
Name of Limited Liability Company							
Dear Sir or Madam:							
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.						
Please return all correspondence concerning the	his matter to the following:						
NICOLAS SIHA							
Name of Person							
LEGALINC CORPORATE SERVICES	INC.						
Firm/Company							
17350 STATE HIGHWAY 249							
Address							
HOUSTON, TX 77064							
City/State and Zip Code							
SUPPORT@LEGALINC.COM							
E-mail address: (to be used for future an	nual report notification)						
For further information concerning this matter	r, please call:						
NICOLAS SIHA	713 478.1040						
Name of Person	Area Code & Daytime Telephone Number						
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314						
Enclosed is a check for the following amount:							
■ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy						

INHS18 (2/14)

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:	EXPRE	ESS, LLC		
2. (a)	105 DECKER COURT SUITE 1100	(b	105 DE	CKER COURT SUITE 1100	
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
	IRVING, TX 75062	_	IRVING	TX 75062	
	05/08/2013		M130000	02952	
3. 5. (a)	Date of filing/registration in Florida USA-RA, LLC	4.		Document number	
, (a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat 831 PRUDENTIAL DRIVE			- e:	
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 12TH FLOOR			-	
	JACKSONVILLE , FL	32207		201	
(b)	LEGALINC CORPORATE SERVICES INC.			2018 FEB 22	
(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				
	5237 SUMMERLIN COMMONS			P 12: 14 OF STATE	
	NEW Registered Office Address:			RID -	
	SUITE 400		·-····································	A	
	FORT MYERS , FL	33907		-	
he cha igent v vas/we	mited liability company is not organized under the lawsinge or changes are made, the Florida street address of tivill be identical. Or, in the case of a Florida limited liability and affirmative vote of the members of cles of organization or the operating agreement of the liability.	he regist oility co the limited l	stered office impany, it i ited liabilit	e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in inpany.	
Signat	ure of a member or authorized representative of a member			Printed or typed name of signee	
provisi he obl o mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I have I in writing of this change	e to act perform for in (preby co	in this cap ance of my Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accep i, F.S. Or, if this document is being filed the limited liability company has been	
Signatu	re of Registered Agent		•		