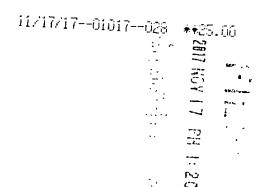
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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
•					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



200305738832



J. HARRIS



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ashley Seeman ashley.seeman@cscglobal.com

Date: November 15, 2017

Order#: 914252-023

Re: EIP FLORIDA, 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: Ashley Seeman 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.

1. N	ame of the limited liability company: EIP FLORIDA, I	LLC			
2. (a)	5550 Newbury Street	(b)	5550 Newbury	/ Street	
(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0)	Mailing a	address of limited liability company: MAY BE POST OFFICE BOX	
	Suite B	<u>—</u>	Suite B		
	Baltimore, MD 21209	<u> </u>	. Baltimore, MD 21209 M13000004213		
	07/02/2013				
3.	Date of filing/registration in Florida	4.	Docum	nent number	
5(a)	CT Corporation System				
, (-)	Registered Agent and Registered Office shown on the records of t	the Florida	Dept. of State;		
	1200 South Pine Island Road				
•	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
(b)					
		<u>.</u>		. 53	
	Plantation	33324		3 /	
	Corporation Service Company			The same of the sa	
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> :		<u>ess</u> :		
	1201 Hays Street			; 	
	NEW Registered Office Address:			20 20	
	Tallahassee , FL	32301			
the ch agent was/w	limited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liakere authorized by an affirmative vote of the members of organization or the operating agreement of the	vs of the S the regist ability con of the limi	ered office and th pany, it is hereby ed liability compa	ne business office of the registered y confirmed that the change(s)	
	Xie & Conie	Jill C	lmi, Authorized Pe	erson	
Signature of a member or authorized representative of a member			Printed or typed name of signee		
provis the ob to mer	by accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provided ely reflect a change in the registered office address, I had in writing of this change.	ee to act i performa I for in C hereby co	n this capacity. I nce of my duties, a napter 605, F.S. (nfirm that the limi	I further agree to comply with the and I am Jamiliar with and accept Or, if this document is being filed ited liability company has been	
Signati	are of Registered Agent Corporation Service Company	BY: Gr	ice E. Kirby, As	ssistant Vice President	