## M13000005056

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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#: 914252-017

Re: EIP CREDIT CO., 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.

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.

l.	Name of the limited liability company: <u>ECOSYSTEM</u>	<u>INVESTME</u>	NT PARTNERS CREDIT CO., LLC
2. (2	5550 Newbury Street, Suite B	(b)	5550 Newbury Street, Suite 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)
	Baltimore, MD 21209		Baltimore, MD 21209
	08/12/2013		M1300005056
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 the Florida D	lept. of State:
	1200 South Pine Island Road		
	Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)	
•			7
	. Disease in the second		rept. of State:
•	Plantation	FL <u>33324</u>	
a	Corporation Service Company		<i>:</i>
(t	Enter name of NEW Registered Agent and/or NEW Register	ed Office addre	<u> </u>
	1201 Hays Street		
	NEW Registered Office Address:		<del></del>
	Tallahassee F	FL_32301	
the c agen was/	e limited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members rticles of organization or the operating agreement of the	of the registe liability com s of the limite	red office and the business office of the registered pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
	nature of amember or authorized representative of a member	Jill Cil	mi, Authorized Person
Sig	nature of a member or authorized representative of a member		Printed or typed name of signee
prov he o o me notif	reby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provid arely reflect a change in the registered office address, ed in writing of this change.	te performan ded for in Ch I hereby con	n this capacity. I further agree to comply with the ce of my duties, and I am familiar with and accept apter 605, F.S. Or, if this document is being filed firm that the limited liability company has been
Signa	ture of Registered Agent Corporation Service Company	, BY: Gra	ce E. Kirby, Assistant Vice President