## M1700000 4504

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DIVISION OF CONFORMIONS

O SIMMONS SEP 2 6 2016

## **COVER LETTER**

TO:	Registration Section Division of Corporations						
SUBJI	WEST DESIGN AND BUILD, LLC						
	Name of Limited Liability Company						
Dear S	ir or Madam:						
The en	closed Registered Agent/Registered Off	ice Change and fe	e(s) are submitted for filing.				
Please	return all correspondence concerning th	is matter to the fol	llowing:				
Lean	a Guzman						
	Name of Person		•				
Regis	stered Agent Solutions, Inc.						
	Firm/Company		-				
1701	Directors Blvd., Suite 300						
	Address						
Austii	n, TX 78744						
	City/State and Zip Code		•				
order	s@rasi.com						
E	-mail address: (to be used for future ann	ual report notifica	ttion)				
For fur	ther information concerning this matter,	please call:					
Leana	a Guzman	888 at (	705-7274				
	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			LING ADDRESS: stration Section ion of Corporations Box 6327 hassee, Florida 32314				
	Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	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	une of the limited liability company: WEST DESIG	GN AN	D BUILD	), LLC	
2. (a	a)	7525 EAST 39TH ST SUITE 100	. (	7525	EAST 39TH ST S	SUITE 100
(u)	•,	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	_ (	Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)		
		INDIANAPOLIS, IN 46226	<del>-</del>	INDIA	NAPOLIS, IN 462	?26
		10/14/2013		M1300	0006504	
3.		Date of filing/registration in Florida	4.		Document numbe	т
5. (	a)	NRAI SERVICES, INC				
٠. ر	ω,	Registered Agent and Registered Office shown on the records of	the Florid	a Dept. of S	State:	
		1200 SOUTH PINE ISLAND ROAD				
		Registered Office Address (MUST BE FLORIDA STREET	ADDRES	<u>s)</u>	<del></del>	16 16
						ASIN S
		PLANTATION , FL	33324			FIL SEP 23 SION OF (
(b)	1)	Registered Agent Solutions, Inc.				2 日
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			<del></del>	2: 53	
	155 Office Plaza Dr., Suite A				53 53	
	NEW Registered Office Address:					
		Tallahassee	32301			
		, FL	,			
the cagen was/	ha t w we rti	mited liability company is not organized under the law nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited li- cre authorized by an affirmative vote of the members of cles of organization or the operating agreement of the Madrew J West	the regability confither the linger the ling	istered off ompany, i nited liabi	fice and the business of it is hereby confirmed lity company or as of company.	office of the registered that the change(s)
Sig	nat	ure of a member or authorized representative of a member			Printed or typed name	e of signee
prov the d to m notif	isi ere lec	by accept the appointment as registered agent and agrouns of all statutes relative to the proper and complete igations of my position as registered agent as providedly reflect a change in the registered office address, I it is thange.  The of Registered Agent	perforn	iance of m	iv duties, and I am fa	miliar with and accept