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5/23/14

NAME: ECP FINANCIAL VILLC

TYPE OF FILING: CHANGE OF AGENT

COST:

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AUTHORIZATION:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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. Name of the limited liability company: ECP FINANCIAL VI	LLC
 (a) Principal office address of limited liability company (<u>Note: MUST BE STREET ADDRESS</u>) 	: 4695 MACARTHUR COURT STE 370 NEWPORT BEACH, CA 92660
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	4695 MACARTHUR COURT STE 370 NEWPORT BEACH, CA 92660
04/14/2014	M14000002573
Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:
Registered Agent:	INCORP SERVICES, INC.
Registered Office Address:	17888 67TH COURT NORTH LOXAHATCHEE, FL 33470
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:
NEW Registered Agent:	National Corporate Research, Ltd., Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	155 Office Plaza Drive
	Tallahassee Fl. 32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company. Signature of a member or authorized epresentative of a member	lorida street address of the registered office lical. Or, in the case of a Florida limited) was/were authorized by an affirmative vote of
Ravi Bhagavatula Printed or typed name of signee	_
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prand I am familiar with and accept the obligations of my pe Chapter 605, F.S. Or, if this document is being filed to me address. I hereby confirm that the limited liability company	
Andrew Affin Richard Arthur, Ast.	Cantany

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (12/13)