M1400000 2855

(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP	WAIT	MAIL			
/P.)	sings Entity No.				
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: December 10, 2015

Order#: 892971-011

Re: ECLIPSE DECATHLON RE FLETCHER, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

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: Janis M. Smith

c/o Corporation Service Company
2711 Centerville Road, Suite 400

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.

1.	Na	me of the limited liability company: ECLIPSE DECAT	THLON	RE FLET	CHER, LLC
2	(a)	3820 Mansell Road, Suite 280	(b	3820	Mansell Road, Suite 280
۷.	(4)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0	/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Alpharetta, GA 30022	_	Alphare	tta, GA 30022
3.		04/25/2014 Date of filing/registration in Florida	- - 4.	M14000	002859 Document number
٦.		Date of ming/registration in Florida	٦.		Document number
5.	(a)	C T Corporation System			_
		Registered Agent and Registered Office shown on the records of th	e Florida	Dept. of Sta	ate:
		1200 South Pine Island Road			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
					运 5
					DEC AHA
		Plantation , FL_	33324		
					88 4
	(b)	Corporation Service Company			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office add	lress:	AMII: 46
					3 2 5
		1201 Hays Street			
		NEW Registered Office Address:			
		Tallahassee, FL_	32301		
the ag	cha ent v s/we	imited liability company is not organized under the laws inge or changes are made, the Florida street address of tivil be identical. Or, in the case of a Florida limited liabere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the li	he regist pility continuity the limited l	tered offi- mpany, it ited liabil iability co	ce and the business office of the registered is hereby confirmed that the change(s) ity company or as otherwise provided in impany.
	Siana	tu- of a member or authorized representative of a member	Don	a Priebe,	Authorized Person Printed or typed name of signee
I in protection to no	herei ovisi e obl mere tified	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 ely reflect a change in the registered office address, I had in writing of this change. Corporation Service Company The of Registered Agent Lizabeth A. Dawson, Asst. Vice President	e to act perform for in C ereby co	in this ca ince of m Chapter 60 onfirm tha	pacity. I further agree to comply with the
~-	,,	Division of Corporations • P.O. Bo	ox 6327	• Tallah	assee, FL 32314

FILING FEE: \$25.00