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(Address)						
(Address)						
(Business Entity Name)						
(Document Number)						
Special Instructions to Filing Officer:						

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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: Lindsey Lockard llockar2@cscinfo.com

Date: December 29, 2014

Order#: 425959-009

Re: OPVHHJV 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: Lindsey Lockard

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.

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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.

2. (a)	5308 W Plano Parkway, Suite 100		(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)	
	PLANO	75093				
	08/13/2014	<u></u>	М	14000005788		
3.	Date of filing/regis	stration in Florida	4.	Document nu	umber	
5. (a) Ashley Martin					
(b)	Registered Agent and Registered	Office shown on the records	of the Florida Dep	ot. of State:		
	4380 W Kennedy Bouleva	ard Suite 600				
	Registered Office Address (M		T ADDRESS)			
	_					
	2390 E Camelback Roa	<u> </u>				
	TAMPA		FL <u>33609</u>		·	
					A SE	
	Corporation Service Comp	pany			조를 뭐 게,	
	Enter name of NEW Registered Agent and/or NEW Registered Office address:			<u></u> -	75 W 22	
	1201 Hays Street					
	NEW Registered Office Address	:			3: 09	
	Tallahassee		FL 32301			
the ch agent was/w the ar	limited liability company is range or changes are made, the will be identical. Or, in the core authorized by an affirmaticles of organization or the core	e Florida street address case of a Florida limited tive vote of the member perating agreement of t	of the registere liability compa s of the limited he limited liabi	ed office and the busing any, it is hereby conficiently company or lity company. The company of the company.	ness office of the registere irmed that the change(s) as otherwise provided in son	
Sign	ature of a member or authorized rep	resentative of a member		Printed or type	d name of signee	
provis the ob to me	eby accept the appointment a ions of all statutes relative to ligations of my position as re rely reflect a change in the re ad in writing of this change.	s registered agent and a the proper and comple gistered agent as provi gistered office address,	ngree to act in t te performance ded for in Chap I hereby confir	his capacity. I furthe e of my duties, and I c oter 605, F.S. Or, if t em that the limited lia	er agree to comply with the am familiar with and accep this document is being filed ability company has been	
	Drace C-Kuble					
Signat	ure of Registered Agent Cal	tion Service Company	RY Grace	E. Kirby, Asst. VP)	

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