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APR 05 LUIO J SHIVERS



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 lindsey.lockard@cscglobal.com

Date: March 31, 2016

Order#: 082717-003

Re: ACHIEVERS 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.

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.

Plantation , FL 33324  (b) Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address:  1201 Hays Street  NEW Registered Office Address:  Tallahassee , FL 32301  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were anthorized by an affirmative vote of the members of the limited liability company or as otherwise provided in	1. N	ame of the limited liability company: ACHIEVERS LL	.c			_
Principal office address of limited liability company: (Nate: MUST BE STREET ADDRESS)  Pleasanton CA 94588  Pleasanton, CA 94588  Pleasanton, CA 94588  O2/05/2015  M15000000990  3. Date of filling/registration in Florida 4. Document number  5. (a) CT Corporation System Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  1200 South Pine Island Road Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  Plantation FL 33324  (b) Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Office address:  Tallahassee FL 32301  If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registere agent will beyidentical? Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were aftering an affirmative vote of the members of the limited limiting to company, it is hereby confirmed that the change(s) was/were aftering the formation and firmative vote of the members of the limited liability company, it is hereby confirmed that the change(s)	2. (a)	6220 Stoneridge Mall Road	(h)	6220 Stoneridge Mall Road	t	
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Kirsten E. Richesson, Authorized Person / Member	>	L. T.	Kirst	en E. Richesson, Authorized P	erson/Member	
Signature of a member or authorized representative of a member Printed or typed name of signee	Sign	ture of a member or authorized representative of a member		Printed or typed name	of signee	_
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accepte obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being file to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.	provis the ob to mer	tions of all statutes relative to the proper and complete j ligations of my position as registered agent as provided rely reflect a change in the registered office address, I h	performa 1 for in C	nce of my duties, and I am fam hapter 605. F.S. Or. if this do	niliar with and accep cument is being filed	e pt d
Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Assistant Vice President	Signati	ure of Registered Agent Comparation Sources Compared	RV. C.	ace E Kirby Assistant Vice	Precident	

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