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LLC REGISTERED AGENT CHANGE CSH 2016-1 EQUITY OWNER, LLC

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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.

(a)	· · ·		(b)		
•	Principal office address of limited liability company: (<i>Note: MUST BE STREET ADDRESS</i>)]	Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)
	8665 E Hartford Dr Suite 200 Scottsdale, AZ 85255		8	8665 E Hartford Dr Suite 200 Scottsdale, AZ 85255	
			S		
	7/16/2015		м	15000005	629
	Date of filing/registration in Florida	4.			Document number
(a)					
	Registered Agent and Registered Office shown on the records o	f the Flor	ida De	pt. of Stat	- 6:
	Corporation Service Company				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRE	<u>(SS)</u>		-
	1201 Hays Street				_
	Tallahassee	L 32301	-2525	_	•
.,	CT Corporation System Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	d Office	addre	<u>\$3</u> :	ELARY O
	NEW Registered Office Address:				
	1200 South Pine Island Road				ORNOL
	Plantation, F	L	ļ 		. r∍ o,
	mited liability company is not organized under the la	ws of th	he Sta	ed office	and the business office of the regist
:ha it w we irti	nge or changes are made, the Florida street address of vill be identical. Or, in the case of a Florida limited l re authorized by an affirmative vote of the members cles of organization or the operating agreement of the	iability of the h e limited	comj imite	d liabilit ility con	y company or as otherwise provided inpany.
t w we arti	vill be identical. Or, in the case of a Florida limited larc authorized by an affirmative vote of the members	iability of the h e limited Te	comj imite d liab arrie E	d liabilir ility com Bates	y company or as otherwise provided apany. Printed or typed name of signee

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

Assistant Secretary

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Signature of Registered Ageny

By: