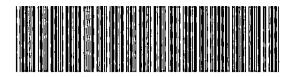
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(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
<u> </u>					

Office Use Only



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APR 12 2019 S. YOUNG



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Jonathan Castro jonathan.castro@cscglobal.com

Date: April 2, 2019

Order#: 703612-003

Re: NICHE MARKETS, LC

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: Jonathan Castro c/o Corporation Service Company 251 Little Falls Drive 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. N	ame of the limited liability company: NICHE MARKE	TS, LLC		
2. (a)	2310 LAKE RIDGE PL NE	(b)	2310 LAKE RIDGE PL NE	
(-)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited li (Note: MAY BE POST O	
	NORTH LIBERTY, IA		NORTH LIBERTY, IA	
	01/24/2017		M17000000751	
3.	Date of filing/registration in Florida	4.	Document number	
5. (a)	C T CORPORATION SYSTEM			
. ,	Registered Agent and Registered Office shown on the records of the	he Florida I	Dept. of State:	
	1200 SOUTH PINE ISLAND ROAD			1.9
	Registered Office Address (MUST BE FLORIDA STREET A		AR-	
	PLANTATION FL_	33324		FOO
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered Company 1201 Hays Street NEW Registered Office Address:	Office addi	ress:	6: 47
	Tallahassee , FL	32301		
the cha agent v was/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial ere authorized by an affirmative vote of the members of cles of organization or the operating agreement of the limited lial.	the registe bility con the limit	tered office and the business office mpany, it is hereby confirmed that ted liability company or as otherw	e of the registered the change(s)
······································			Jill Cilmi, Authorized Person	
I herei provisi the obl to mere notified	ture of a member or authorized representative of a member by accept the appointment as registered agent and agreent ons of all statutes relative to the proper and complete pigutions of my position as registered agent as provided by reflect a change in the registered office address. I have a change of this change. The of Registered Agent Corporation Service Company		Printed or typed name of si in this capacity. I further agree to nce of my duties, and I am familia hapter 605, F.S. Or, if this documnfirm that the limited liability comace E. Kirby, Asst. Vice Preside	o comply with the or with and accept nent is being filed npany has been