2/18/2018

Division of Corporations

Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000055274 3)))



H180000552743ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Email Address:_

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338

: (954)208-0845 William Cit. Fax Number

Enter the email address for this business entity to be used for fut annual report mailings. Enter only one: email address please.

un e	5
	¥
設計	۳
Stil	Ĉ

LLC REGISTERED AGENT CHANGE PST SERVICES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$55.00

RECEIVED

FEB 1 9 2018

Electronic Filing Menu Corporate Filing Menu

Help

S. WARREN

FEB 1 9 2018

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY $\underline{\underline{\mathsf{C}}}$ OMPANY

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.

	Principal office address of limited liability company:	_ (1	b)	Mailing address of limited liability company:
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3055 LEBANON PIKE, SUITE 1000		3055 L	EBANON PIKE, SUITE 1000
	NASHVILLE, TN 37214	_	NASHV	VILLE, TN 37214
	03/03/2017		M170000	001754
	Date of filing/registration in Florida	٠ 4.	:43	Document number
. (a)				
(1)	Registered Agent and Registered Office shown on the records of the	he Florida	i Dept. of S	State:
	CORPORATION SERVICE COMPANY			
	Registered Office Address	DDRES	£}	≥ 8 3
	1201 HAYS STREET		·	_ 52 m
	TALLAMASSEE , FL	32301-2	:25Mi	一
	, 110		-}	ASSI
				변유 중 년
(h)				
(b)	Enter name of NEW Registered Agent and/or NEW Registered (Office ad	dress:	Es s
(b)	Enter name of NEW Registered Agent and/or NEW Registered (Office ad	dress:	FLOR
(b)	C T Corporation System	Office ad	dress:	STATE FLORIDA
(b)		Office ad	dress:	STATE FLORIDA
(b)	C T Corporation System	Office ad	dress:	STATE FLORIDA
(b)	C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road		dress:	STATE FLORIDA
(b)	C T Corporation System NEW Registered Office Address: 1200 South Pine Island Road		dress:	FLORIDA
f the line chargent wear	CT Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation , FL mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liability company and affirmative vote of the members of organization or the operating agreement of the l	33324 rs of the the registive for the lim	State of si-red off papary, I have liability c	Florida, it is hereby confirmed that after tice and the business office of the regist it is hereby confirmed that the change(so ility company or as otherwise provided company.
the line chargent we as/we artic	CT Corporation System NEW Registered Office Address: 1200 South Pine Island Road Plantation FL mited liability company is not organized under the law nge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liability control by an affirmative vote of the members of	33324 rs of the the registive for the lim	State of si-red off papary, I have liability c	Florida, it is hereby confirmed that after the fice and the business office of the regist it is hereby confirmed that the change(s) illify company or as otherwise provided
f the line chargent was/we action article from the control of the	NEW Registered Office Address: 1200 South Pine Island Road Plantation	33324 rs of the the regis bility of the limited I	State of si-red off propany, I have liability c	Florida, it is hereby confirmed that after fice and the business office of the regist it is hereby confirmed that the change(s illity company or as otherwise provided company. Souid Moss Printed or typed name of signee

FILING FEE: \$25.00

INHS18 (2/14)