Division of Corporations

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Division of Corporations

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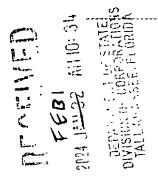
From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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LLC REGISTERED AGENT CHANGE DAT SOLUTIONS, LLC

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Help

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)			(b)		
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			_	ress of limited liability company; AY BE POST OFFICE BOX)
	8405 SW NIMBUS AVE			8405 SW NIMBUS A	
					
	BEAVERTON, OR 97008			BEAVERTON, OR 9	77008
	06/19/2017		1	M17000005178	
	Date of filing/registration in Florida	4.		Documen	it number
(a))				
1,	Registered Agent and Registered Office shown on the records			Dept, of State:	
	CORPORATION SERVICE COMPANY				_
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				2021 SE
	1201 HAYS STREET				AS A T
	TALLAHASSEE	FL 32301			2024 FEB - 1 AM II SECHLIAHASSEE
					AM 10: 36
(b)	Enter name of NEW Registered Agent and/or NEW Register	,			
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>	ed Office	add	ress:	75 3
	United Agent Group Inc.				177
	NEW Registered Office Address:				
	801 US Highway 1				
	North Palm Beach	_{FI} 33408			
		l L			
	limited liability company is not organized under the le or changes are made, the Florida street address of the control of the liability of the control of th				
gent	will be identical. Or, in the case of a Florida limited	liability	cor	npany, it is hereby co	onfirmed that the change(s)
	rere authorized by an affirmative vote of the members ticles of organization or the operating agreement of the				y or as otherwise provided in
	/s' Tymberlyn Teefey			berlyn Teefey, Attorne	y-in-Fact
Sign	ature of a member or authorized representative of a member	_		Printed or	typed name of signee
rovis e ob mer	eby accept the appointment as registered agent and a cions of all statutes relative to the proper and comple digations of my position as registered agent as provid rely reflect a change in the registered office address, ad in writing of this change.	gree to a te perfor led for in I hereby	ict i ma i Ci coi	in this capacity. I fu nce of my duties, and hapter 605, F.S. Or, nfirm that the limited	rther agree to comply with the l I am familiar with and accept if this document is being filed l liability company has been
wigie	nberlyn Teefey Tymberlyn Teefey, Special Sec	retary			
'Tyn	interity in rected to the control of				

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