M1800000 5391

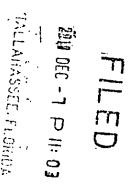
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP W	AIT MAIL					
(Business Entity Name)						
(Document Number)						
Certified Copies Cert	ificates of Status					
Special Instructions to Filing Officer:						

Office Use Only



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12/07/18--01026--008 **25.00



D. SCOTT DEC 1 3 2018



CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ami Casper ami.casper@cscglobal.com

Date: December 5, 2018

Order#: 514535-015

Re: AFN, LLC

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: Ami Casper

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

7 DEC -1 P II:

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: AFN, I	LC _				
2. (a)	7350 N Dobson Rd, Suite 130		(b)			
2. (a)	Principal office address of limited liability cor (Note: MUST BE STREET ADDRESS	· ·	(0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
	Scottsdale, AZ 8525	56				
3	06/07/2018		M180000			
3.	Date of filing/registration in Florida	a 4,		Document number		
5. (a)	NRAI Services, Inc.			_		
	Registered Agent and Registered Office shown on the	records of the Flo	rida Dept. of Sta	te:		
	1200 South Pine Island Road					
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						
	Plantation	, FL333	324		330 OEC	1
(b)	Corporation Service Company			_	1 1	ţ
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> 1201 Hays Street	Registered Office	address:	ALLABASSEL, FLÓRIÐ	יום ר	FILED
	NEW Registered Office Address:			- S.	0 0 3	
	Tallahassee	, FL <u>323</u>	01	_		
the cha agent was/we the art	imited liability company is not organized undange or changes are made, the Florida street a will be identical. Or, in the case of a Florida lere authorized by an affirmative vote of the micles of organization or the operating agreement of a member of authorized representative of a member of authorized representative of a member of accept the appointment as registered agent	ddress of the re limited liability nembers of the ent of the limite	gistered offic company, it limited liabilited d liability con effrey Simmo	te and the business officis hereby confirmed that ty company or as otherwingany. In a Authorized Personal Printed or typed name of second control of the co	ce of the it the cha wise prov	registered ngc(s) rided in
	ov accept the appointment as registered agentions of all statutes relative to the proper and digations of my position as registered agent as ely reflect a change in the registered office as din writing of this change.			edutes, and I am familie 5, F.S. Or, if this documents of the limited liability conspect, Asst. Vice Presidents		nd accept eing filed as been

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