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(1	Requestor's Name)
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	City/State/Zip/Phone #)
PICK-UP	│
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(1	Business Entity Name)
(1	Document Number)
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Certified Copies	Certificates of Status
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Special Instructions	to Filing Officer:
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	Office Use Only



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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobsal.com

Date: September 13, 2019

Order#: 907447-001

Re: CASE STRATEGIES GROUP, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Meghan Groom 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.

I. N	lame of the	limited liability company: CASE STRATEG	IES GROU	JP, LLC				
2 (a)	600 BRIC	 	_ (b) _					
~. (a)		Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			ing address of lim		-	
	MIAN	MI FL 33131	_					
	02/06/	/2019	_M	1190000016	99			
3.	Ε	Pate of filing/registration in Florida	4.	Do	cument numbe	er		
5. (a	\ CTC	 DRPORATION SYSTEM						
J. (L	/	Agent and Registered Office shown on the records of th	e Florida Dej	ot, of State:				
	1200 S	 DUTH PINE ISLAND ROAD						
		Office Address (MUST BE FLORIDA STREET AL	DRESS)					
	PLANTA	ATION, FL_	33324			SEULLÄHÄSSEE.	2019 SEP	50
(b)	Corpora	l tion Service Company				: ۲۲۰ تونو	7	inater.
	Enter name	of NEW Registered Agent and/or NEW Registered O	ffice addres	<u></u>		SO CO CO	PM 2:	: : :
	1201 Ha	 ys Street				nda Lua	2:2	"VINIE!
	NEW Regi	stered Office Address:		·			0	
								
	Tallahas	 see	32301					
the ch agent was/w	ange or cha will be ider ere authori	lity company is not organized under the lawsinges are made, the Florida street address of the florida. Or, in the case of a Florida limited liabled by an affirmative vote of the members of anization or the operating agreement of the li	ne registere ility comp the limited	ed office an any, it is he Hiability co	d the business reby confirme ompany or as o	office of d that the	the reg	gistered e(s)
	X	Lie & Comi	Jill Cilm	i, Authorize		·		
I here provis the ob-	thy accept to ions of all soligations of rely reflect to	the appointment as registered agent and agree statutes relative to the proper and complete pointment as registered agent and agree that the proper and complete point position as registered agent as provided a change in the registered office address. I he got this change.	e to act in terformance for in Chapreby confi	this canacit	nted or typed nar y. I further ag es, and I am fa S. Or, if this a limited liabilit	ree to co	mnless	rith the laccept ny filed heen
Signat	ure of Registe	red Agent Corporation Service Company	BY: Grace	e E. Kirby,	Asst. Vice P	resident		