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(Requestor's Name)				
(Addross)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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Special Instructions to Filing Officer:				
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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: Grace Kirby grace.kirby@cscglobal.com

Date: July 6, 2017

Order#: 711011-008

Re: CFS OF PENSACOLA, FL, L.L.C.

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: Grace Kirby

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.

L Na	ame of the limited liability company: CFS OF PENSA	.COLA, F	FL, L.L.C.
2. (a)	6219 NORTH PALAFOX STREET	(b)	6219 NORTH PALAFOX STREET
2. (11)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (")	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	SUITE G		SUITE G
	PENSACOLA, FL 32503	_	PENSACOLA, FL 32503
	11/21/1997	_	M97000000771
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	LEXIS DOCUMENT SERVICES INC.		
J. (a)	Registered Agent and Registered Office shown on the records of the	ne Florida I	Dept. of State:
	1201 HAYS STREET		
	Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	Z Zanada za
(b)	TALLAHASSEE , FL	32301	
	Corporation Service Company		
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered C</u>	Office addi	مر زین
	1201 Hays Street		—————————————————————————————————————
	NEW Registered Office Address:		
	~	22204	
	Tallahassee, FL_	32301	<u></u>
the cha agent w was/we the arti	imited liability company is not organized under the law inge or changes are made, the Florida street address of twill be identical. Or, in the case of a Florida limited lial are authorized by an affirmative vote of the members of cles of organization or the operating agreement of the law of a member of a member authorized representative of a member by accept the appointment as registered agent and agreems of all statutes relative to the proper and complete prope	the registed bility continuity co	ompany, it is hereby confirmed that the change(s) inted liability company or as otherwise provided in liability company. Printed or typed name of signee
the obli to mere notified	ons of all statutes relative to the proper and complete to the proper and complete pigations of my position as registered agent as provided by reflect a change in the registered office address. I he is a writing of this change.	jor in Cl ereby coi	
Signatur	re of Registered Agent Corporation Service Company	BY:	Elizabeth A. Dawson, Auto