## M1400000 M14

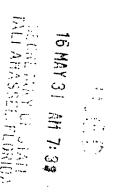
(Requestor's Name)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(2-3					
(Document Number)					
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05/31/16--01012--027 \*\*25.00



## **COVER LETTER**

TO: Registration Section Division of Corporation	is					
PRAGER & CO	PRAGER & CO., LLC					
	Name of Limited Liability Company					
Dear Sir or Madam:						
The enclosed Registered Agent	Registered Office Change and fcc(s) are submitted for filing.					
Please return all correspondence	e concerning this matter to the following:					
Aimee Vasquez						
Name	of Person					
Registered Agent Solution	ns, Inc.					
Firm/C	Company					
1701 Directors Blvd., Suit	e 300					
Addı	ess					
Austin, TX 78744						
City/State	and Zip Code					
Hoyd. Hoyd. Hoanso@pragor.com accounts payable & pragor.com						
E-mail address: (to be use	ed for future annual report notification)					
For further information concer	ning this matter, please call:					
Aimee Vasquez	888 705-7274					
Name of Perso	Area Code & Daytime Telephone Num					
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 3	Registration Section Ons Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314					
Enclosed is a check for the following amount:						
☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy					

INHS18 (2/14)

## 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. Na	ame of the limited liability company: PRAGER & C	O., LI	_C			
2. (a)	(a) ONE MARITIME PLAZA		(b) ONE MARITIME PLAZA			
( )	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)				f limited liability company: E POST OFFICE BOX)	
	SUITE 1000		SUITE 10			
	SAN FRANCISCO, CA 94111	<b>-</b>	SAN FRA	ANCISCO, (	CA 94111	
	12/14/1998		M9800000	1494		
3.	Date of filing/registration in Florida	4.	1	Document nui	mber	
5. (a)	CORPORATION SERVICE COMPANY					
J. (4)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of State:	:		
	1201 HAYS STREET					
	Registered Office Address (MUST BE FLORIDA STREET)	4DDRE	(2.2)			
	TALLAHASSEE	3230	1			
	, , , , , , , , , , , , , , , , , , , ,	'			- 88 <b></b>	
(b)	Registered Agent Solutions, Inc.		<del></del>			
	Enter name of NEW Registered Agent and/or NEW Registered	Office a	<u>iddress</u> :			
	155 Office Plaza Dr., Suite A				ASSEEL FLORIDA	
	NEW Registered Office Address:	•	•	,	%>	
	Tallahassee	3230	1			
	, FI	,				
the chagent was/w	limited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members cicles of organization or the operating agreement of the	the regability of the li	gistered office company, it is mited liability	and the busing hereby confined to company or a pany.	ness office of the registered rmed that the change(s)	
Signa	iture of a rifember or authorized representative of a member)	-		~	l name of signee	
provis the ob to mer	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ad in writing of this change.  Jaclyn Wright, Asst	perfor d for it hereby	mance of my o	acity. I furthe luties, and I a , F.S. Or, if the he limited lia	r agree to comply with the m familiar with and accep his document is being filed bility company has been	
Signan	are of Registered Agent	. <b>36</b> 616	otal y			

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