Document Filing Sheet Priority 2 Priority 1 Priority 3 Priority 4 Priority 5 Priority 6 Priority 7 (One Hr) (Two Hr) (Same Day) (24 Hr) (Must Approval) (Reg. Approval) (Reg. Work) Wednesday, November 19, 2014 DATE SUBMITTED MCS# 3732495 The Corporation Trust Company REQUESTOR NAME WILM FF TEAM 2 Elise Barnett ATTN. 302-777-0285 PHONE **JOVIAN P4 LLC** 4112121 141431866 9000010 FILER'S NUMBER FILE NUMBER RESERVATION NO. 0133Y COA TYPE OF DOCUMENT Χ CHANGE of AGENT/OFFICE CHANGE OF STOCK CHANGE of NAME CORPORATIONS METHOD of RETURN MESSENGER/PICKUP FRANCHISE TAX YEAR FED, EXPRESS Acct.# FILING FEE TAX __ REGULAR MAIL **RECEIVING & INDEXING** FAX No. CERTIFIED COPIES NO. SPECIAL SERVICES __X_ OTHER E-MAIL KENT COUNTY RECORDER COMMENTS/FILING INSTRUCTIONS **NEW CASTLE COUNTY RECORDER** SUSSEX COUNTY RECORDER Changing from 9000014 to 9000010. Thanks! TOTAL \$ _____ You have my authorization to charge my credit card for this service: ____ - ___ - ___ Exp. Date ____ Signature _____ Printed Name _____

INSTRUCTIONS

staying within the square.

as the FIRST PAGE.

1. Full shade in the required Priority square using a dark pencil or marker,

2. Each request must be submitted as a separate item, with its own. Filling sheet

AGENT USE ONLY

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STATE OF DELAWARE CERTIFICATE OF AMENDMENT CHANGING ONLY THE REGISTERED OFFICE OR REGISTERED AGENT OF A LIMITED LIABILITY COMPANY

The limited liability company organized and existing under the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

Jovian P4 LLC	mited liability company is
	fice of the limited liability company in the State of Delaware is
1209 Orange Street	(street), in the City of Wilmington
	. The name of the Registered Agent at such address upon slimited liability company may be served is
THE CORPORATION TRUS	COMPANY
	By:
	Authorized Person
	Name: Stephanie Boehm
	Print or Type