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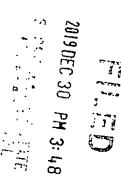
(Requestor's Name)
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(Business Entity Name)
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SERVICES	CORPOR	RATION NAME (S) AND DOCU	MENT NUMBER (S
PROGRESSIVE	Employer	Management Compa	N4 XX 1 1/6
Filing Evidence Plain/Confirmation		Type of Docum Certificate of Sta	ient
□ Certified Copy		□ Certificate of Go	ood Standing
		□ Articles Only	
Retrieval Reques Photocopy Certified Copy	<u>t</u>	All Charter Doc Articles & AmerFictitious NameOther	
NEW FILINGS	AMEN	IDMENTS	
Profit	Ameno	iment	
Non Profit	Resign	nation of RA Officer/Director	S.
Limited Liability	Change	e of Registered Agent	
Domestication		ution/Withdrawal	
Other	Merger		
	<u> </u>		

 THE WITTERNOS
 Profit
 Non Profit
 Limited Liability
Domestication
Other

OTHER FILINGS				
	Annual Reports			
	Fictitious Name			
	Name Reservation			
	Reinstatement			

REGISTRATION/QUALIFICATION
Foreign
Limited Liability
Reinstatement
Trademark
Other

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	me of the limited liability company: Progressive Empl	loyer Man	agement Cor	mpany XXI, LLC	<u> </u>
2 (a)		(b)	<u>. </u>	
£. (u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		;	Mailing address of	limited liability company: E POST OFFICE BOX
	3350 Buschwood Park Drive, Suite 200	6407 Parkland Drive			
	Tampa. FL 33618	_	Sarasota, FL 34243		
	12/31/2009		L09000123	394	_
3.	Date of filing/registration in Florida	4.		Document nur	mber
- / \	Corporation Service Company				
5. (a)	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of Stat	- te:	
	1201 Hays Street				
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS	<u> </u>	_	
	Tallahassec, FI	32301		-	201
(b)	NRAI Services, Inc.			_	2019 DEC
(-)	Enter name of NEW Registered Agent and/or NEW Registered	d Office ad	<u>dress</u> :		3
			_	_	P 111
	NEW Registered Office Address:				<u></u>
	1200 South Pine Island Road			_	rri ∞
	Plantation . F	33324 L			
the cha agent was/w the art	limited liability company is not organized under the la ange or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited I ere authorized by an affirmative vote of the members icles of organization or the operating agreement of the	of the reginability of the line elimited	stered offic ompany, it nited liabili liability co	is hereby confi ity company or mpany.	ness office of the registered rmed that the change(s)
	ature of a member or authorized representative of a member		er C. Gradov	vski, Manager Printed or types	d name of signee
I here	thy accept the appointment as registered agent and as ions of all statutes relative to the proper and complete ligations of my position as registered agent as providely reflect a change in the registered office address. It was services, linc.	gree to ac e perforn ed for in I hereby c -	t in this cap nance of my Chapter 60 confirm tha		