M09000001094

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15 JUL 17 PN 3: 15

J. HARRIS

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: Oneida Total	Integra	ated Enterp	orises, LLC
	(a)	Oneida Total Integrated Enterprises, LLC	(_{b)} Oneida	Total Integrated Enterprises, LLC
۷.	(α)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	\'		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		1033 N. Mayfair Road, Suite 200		1033 N.	Mayfair Road, Suite 200
		Milwaukee, WI 53226	_	Milwauk	ee, WI 53226
		March 19, 2009		M090000	01094
3.		Date of filing/registration in Florida	4.		Document number
5	(a)	Galand Beard			
٠.	(4)	Registered Agent and Registered Office shown on the records of	the Florid	la Dept. of State	e:
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					•
		108 Dixie Lane			
		Cocoa Beach , FL	32931		2
	(b)	Galand Beard			JUL 17
	(0)	Enter name of NEW Registered Agent and/or NEW Registered Office address:		1 2 8	
					25 6
					_ <u>24</u> _
		NEW Registered Office Address:			Spin Si
		106 Dixie Lane			-
		Cocoa Beach , FL	32931	l	
ıc	41 1			- 64-4- 46 51	-
th	e cha	imited liability company is not organized under the la- ange or changes are made, the Florida street address of	f the reg	istered office	e and the business office of the registered
ag	ent v	will be identical. Or, in the case of a Florida limited li ere authorized by an affirmative vote of the members of	ability o	ompany, it is	s hereby confirmed that the change(s)
th	e art	icles of organization or the operating agreement of the	limited	liability con	npany.
	1	Willest Chulmeeth PE.	Wi	ilbert Renti	meester, Chairman of the Board
		ture of a member or authorized representative of a member			Printed or typed name of signee
I pr th to no	here ovis e obi mer otifie	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 ely reflect a change in the registered office address, I d in writing of this charge.	ree to ac perforn ed for in hereby c	ct in this cap nance of my Chapter 605 confirm that	acity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been
Si	gnatu	are of Registered Agent			