

M13000000647

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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APPROVED
AND
FILED
13 DEC -9 AM 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS
DEC 10 2013
EXAMINER

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: PARK 'N FLY SERVICE, LLC

2. (a) Principal office address of limited liability company: 2060 Mt. Paran Road NW
Suite 207
Atlanta GA 30327
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 2060 Mt. Paran Road NW
Suite 207
Atlanta, GA 30327
(Note: MAY BE POST OFFICE BOX)

01/22/2013
 3. Date of filing/registration in Florida

M1300000647
 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
 Registered Agent: C T Corporation System
 Registered Office Address: 1200 S. Pine Island Road
Plantation FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Agent: Corporation Service Company
NEW Registered Office Address: 1201 Hays Street
(MUST BE FLORIDA STREET ADDRESS) Tallahassee, FL 32301

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

/s/ Dona Priebe

 Signature of a member or authorized representative of a member

Dona Priebe, Authorized Person
 Printed or typed name of signee

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: Sylvia Queppet
 Signature of Registered Agent Corporation Service Company Sylvia Queppet, Assistant Vice President

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

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 Signature of Registered Agent Corporation Service Company Sylvia Queppet, Assistant Vice President

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