## S59273

	(Requestor's Name)				
	(Address)				
	(Address)				
<u> </u>	(City/State/Zip/Phone #	)			
PICK-UP	WAIT	MAIL			
	(Business Entity Name)	<del></del>			
		<u> </u>			
(	(Document Number)				
Certified Copies	Certificates of	Status			
Special Instructions to Filing Officer:					
1					
II.		1			
		}			

Office Use Only



500208137425

DEPARIMENT OF STATE DIVISION OF CURPORATION TALL ANASSES FLORIDA

RECEIVED
11 JUN -3 AM 10: 50

1 JUN -3 PM 1:2 ECRETARY OF STAT LLAHASSEE, FLORI

ָר ררי

RA. Change C.COULLIETTE

JUN 0 3 2011

**EXAMINER** 



	•	*						
	ACCOUNT NO.	:	I20000001	95				
	REFERENCE	:	788875	7828686				
	AUTHORIZATION	:	Squella El	hillo				
	COST LIMIT	:	\$ \( \frac{1}{3} \frac{1}{5} \frac{1}{10} \)					
ORDER DATE :	May 24, 2011							
ORDER TIME :	9:11 AM							
ORDER NO. :	788875-049							
CUSTOMER NO:	7828686							
					<b></b>			
CHANGE OF AGENT								
NAME: NFS OF BROWARD, INC.								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON	: TROY TODD X29	40						
EXAMINER:								

## $^{\backprime}$ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		92, 607.1508, or 617.1508, Florida Statute nized under the laws of the State of Florid			
in ord	er to change its registered office or regist	tered agent, or both, in the State of Florida			
1. The name of	the corporation: NFS OF BROWARI	D, INC.			
2. The principa	l office address: 1950 Eisenhower Blv	d., Ft. Lauderdale, FL 33316			
3. The mailing	address (if different): 55 Cambridge Pa	rkway, Ste 200, Cambridge, MA 0214	12		_
4. Date of incor	poration/qualification: 06/10/1991	Document number: S59273			
	d street address of the current registered autment of State:	agent and registered office on file with the			
	C T Corporation System				
	1200 South Pine Island Road		<b>Z</b> S	_	
	Plantation, FL 33324 US			1 JUN	
6. The name an (if changed):	d street address of the new registered age	nt (if changed) and /or registered office	TARY OF ASSEE	1-3 PM	•
	Corporation Service Company	<del></del>	FLOR STA	4 1: 2	
	1201 Hays Street		ATE	27	
	(P.O. Box NOT acceptable	·)			
	Tallahassee, FL 32301				
The street addr as changed wil	ess of its registered office and the street l be identical.	address of the business office of its regis	tered ag	ent,	
Such change w authorized by t	as authorized by resolution duly adopte he board, or the corporation has been no	d by its board of directors or by an office of the change.	r so		
Mari	ser tablell	Maureen Cathell, Vice President			
	rure of an officer or director)	(Printed or typed name and title)			
I hereby accept I further agree of my duties, a document is be corporation ha	t the appointment as registered agent are to comply with the provisions of all stated I am familiar with and accept the obing filed merely to reflect a change in the sean notified in writing of this change on Scrvicc Company	nd agree to act in this capacity. tutes relative to the proper and complete ligation of my position as registered agen he registered office address, I hereby conj :	performe t. Or if firm that	ance this the	
By: $\leq_{\mathcal{L}}$	. Uma -	05/24/2011			
Ø (S	gnature of Registered Agent)	(Date)			
If signing on be	ehalf of an entity:				
Sylvia Quepp					
(	Typed or Printed Name)				

\* \* \* FILING FEE: \$35.00 \* \* \*