

(Requestor's Name)	
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PICK-UP WAIT MAIL	
. (Business Entity Name)	
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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 385521 7905215

Mileran

AUTHORIZATION :

COST LIMIT : \$ 25

ORDER DATE: October 18, 2012

ORDER TIME : 4:36 PM

ORDER NO. : 385521-022

CUSTOMER NO: 7905215

CHANGE OF AGENT

NAME: MANAGED BUSINESS SOLUTIONS,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Harry B. Davis

EXAMINER'S INITIALS:

ATATEMENT 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.

Name of the limited liability company: MANAGED BUSINESS SOLUTIONS, LLC		
 (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS) 	y: 12325 Oracle Blvd Ste 200	
,	-Colorado Springs, CO 80921	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	12325 Oracle Blvd	
	Ste 200.	
	_Colorado Springs, CO 80921	
08/30/2006	M06000004811	
3. Date of filing/registration in Florida	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 South Pine Island Road	
registored Office Marcus.	Plantation, FL 33324 US	
	The state of the s	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:		
NEW Registered Agent:	Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	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 ompany it is increby 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. Signature of a member or authorized Person (Printed or typed name of signce) 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 cam 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:		
(Signature of Registered Ascatt) Corporation Service Company Sylvia Queppet, Asst. Vice President		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

FILING FEE: \$25.00