## A 27 858

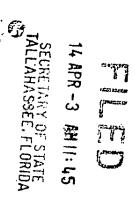
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Consideration A. Fillion Office					
Special Instructions to Filing Officer:					

Office Use Only



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04/07/14--01002--015 \*\*10.00 02/10/14--01047--024 \*\*25.00



J. Shivers APR 0 7 2014



## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 11, 2014

CSC - WILMINGTON 2711 CENTERVILLE RD WILMONGTON, DE 19808

SUBJECT: LEVY WORLD LIMITED PARTNERSHIP

Ref. Number: A27858

We have received your document for LEVY WORLD LIMITED PARTNERSHIP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 214A00003093

Justin M Shivers Regulatory Specialist II Registration/Qualification Section

www.sunbiz.org



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: February 6, 2014

Order#: 955227-172

Re: LEVY WORLD LIMITED PARTNERSHIP

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Lindsey Lockard

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT, OR BOTH

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1	LEVY WORLD LIMITE	D PARTI	NERSHIP	
Nam	ne of Limited Partnership or Limite	d Liability Lin	nited Partnership	
2. 02	2/02/1989	3.	A2785	8 .
Date of filing/registration in Florida		I	Florida document number	
4. The name of the reg Department of State:	istered agent and the registered off	ice address as s	shown on the reco	ords of the Florida
	C T Corporation	n System		
-	Name	· · · · · · · · · · · · · · · · · · ·	<del></del>	
	1200 South Pine	Island Road	d	
_	Address			
	Plantation	· FL	33324	
_	City, State an	d Zip		
5. The name and Florid	da street address of the new registe	red agent and/o	or office:	
	Corporation Service	e Compan	y	<i>6</i> 7
_	Name		<u> </u>	A.
	1201 Hays \$	Street		111 1980 14 *
<del>-</del>	Florida street address (P.O. Box not acceptable)			
	Tallahassee	FL	32301	
_	City, State an	d Zip		그 글 😇 🚶
6. Such change(s) is/ar	e effective when filed by the Florid	la Department	of State.	S1.
	· ·	•		7. <b>5.</b> 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3.
Signature General Pa	artner Dona Priebe, V.P. on I	Rehalf of Le	vv GP Cornor	etion the G P
_	,			ŕ
	pointment as registered agent and a ions of all statutes relative to the pr			
and I am familiar with a	an accept the obligations of my pos			· •, ···, · · · · · · · · · · · · · · ·
By: Y	n Service Company			
Signature of Registered	Agent Grace E. Kirby, Asst.	Vice Presid	ent	

\$35.00

Filing Fee:

Certified Copy (optional): \$52.50