

BD7000000141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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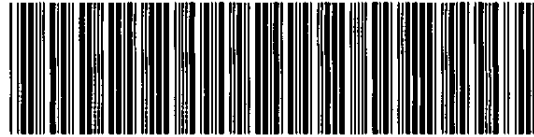
(Business Entity Name)

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B. KOHR  
JAN - 5 2009  
EXAMINER



CORPORATION SERVICE COMPANY'

ACCOUNT NO. : 072100000032

REFERENCE : 833346 7683446

AUTHORIZATION

COST LIMIT \$ 35.00

ORDER DATE : December 19, 2008

ORDER TIME : 10:03 AM

ORDER NO. : 833346-095

CUSTOMER NO.: 7683446

CHANGE OF AGENT

NAME: CARISCH BROTHERS LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

EXAMINER'S INITIALS: \_\_\_\_\_

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SEAL OF THE STATE  
TALLAHASSEE, FLORIDA

**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. CARISCH BROTHERS LP  
Name of Limited Partnership or Limited Liability Limited Partnership
2. 04/27/2007 3. B07000000141  
Date of filing/registration in Florida Florida document number

4. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, FL 33324

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box not acceptable)

Tallahassee FL 32301

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

Maureen Cullen

Signature of General Partner

Maureen Cullen, Attorney in Fact on Behalf of George Carisch, G.P.

*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.*

Corporation Service Company

By: Michelle R. Vannoy

Signature of Registered Agent Michelle R. Vannoy, Asst. V.P.

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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