PLEASE HONOR ORIGINAL SUBMISISON DATE. 12/29/2016 WE NEVER RECEIVED EVIDENCE.

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

PLEASE HONOR ORIGINAL SUBMISISON DATE. 12/29/2016 WE NEVER RECEIVED EVIDENCE.

Note: **Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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```
To:
        Division of Corporations
        Fax Number     : (850)617-6380

From:
        Account Name    : C T CORPORATION SYSTEM
        Account Number  : FCA000000023
        Phone           : (614)280-3338
        Fax Number      : (954)208-0845

 **Enter the email address for this business entity to be used for future
   annual report mailings. Enter only one email address please.**

        Email Address:_____
```

REGISTERED AGENT CHANGE
JIMLAR CORPORATION

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	$35.00

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Electronic Filing Menu   Corporate Filing Menu   Help

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D CUSHING

COVER LETTER

TO: Amendment Section
Division of Corporations

Jimlar Corporation
SUBJECT:_____
Name of Corporation

F03000005228
DOCUMENT NUMBER:_____

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elizabeth Adams
_____
Name of Contact Person

CT Corporation System
_____
Firm/Company

111 8th Avenue, 13th Floor
_____
Address

New York, NY 10011
_____
City/State and Zip Code

elizabeth.adams@wolterskluwer.com
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elizabeth Adams   212   590-9245
_____   at (_____)_____
Name of Contact Person   Area Code & Daytime Telephone Number

Enclosed is a $35.00 check made payable to the Department of State.

Mailing Address:	**Street Address:**
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle
	Tallahassee, FL 32301

CR2E045 (03/12)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of _____
_____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Jimlar Corporation

2. The principal office address: 350 Fifth Avenue, 8th Floor, New York, NY 10018

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/22/2003   Document number: F03000005228

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

   National Corporate Research, LTD, Inc.

   115 Calhoun Street, Suite 4

   Tallahassee, FL, 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

   C T Corporation System

   c/o C T Corporation System, 1200 South Pine Island Road

   P.O. Box NOT acceptable

   Plantation, Florida 33324

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

_____   Robert K. Smith   EVP-Secretary
Signature of an officer or director   Printed or typed name and title

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 obligation of my position as registered
agent. Or, if this document is being filed merely to reflect a change in the registered office address, I
hereby confirm that the corporation has been notified in writing of this change:

C T Corporation System
By: _____   12/27/16
Signature of Registered Agent   Date

If signing on behalf of an entity:
Leslie Martin
Assistant Secretary
Typed or Printed Name

* * * FILING FEE: $35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (03/12)

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