F07000034118

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

Office Use Only



100163938281

12/28/09--01023--013 **35.00

Boch

SLUNG TARY OF STATE ALLAHASSEE, FLORIDA

No DEC 38 VM III: D



December 22, 2009

Division of Corporations P.O. Box 6198 Tallahassee, FL 32314

RE: Bodel, Inc.

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Office, along with the required filing fee in the amount of \$35.00 for the above referenced entity.

If you should have any questions, please feel free to contact me.

Sinderely,

Celeste A. Stellabott Legal Department

Enclosure

COVER LETTER

Division of Cor	orations		
SUBJECT:	Bodel, Ir Name of Co		_
DOCUMENT NUMBE	r:F070	000003418	
The enclosed Statement	of Change of Registered Office	/Agent and fee are submi	tted for filing.
Please return all corresp	ondence concerning this matter	to the following:	·
	Celeste A. Name of Con	Stellabott tact Person	
	Susquehanna Intern Firm/Co		
_	401 City Aven	ue, Suite 220	
	Bala Cynwyd City/State an	l, PA 19004 d Zip Code	
E-m	celeste.stellabo	ott@sig.com iture annual report notif	ication)
For further information of	concerning this matter, please c	ail:	
Celest	e A. Stellabott	at (484)	562-1255
Name of	Contact Person	at (<u>484</u>) Area Code & Dayti	me Telephone Number
Enclosed is a \$35.00 che	eck made payable to the Departi	nent of State.	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Se Division of Co Clifton Buildin 2661 Executiv Tallahassee, F.	ection orporations ng e Center Circle

TO:

Amendment Section

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

statement of ch	nange is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida Sorganized under the laws of the State of $\frac{1}{2}$ registered agent, or both, in the State of F	Delaware
1. The name of	the corporation: Bodel, Inc.		
2. The principa	office address: 1515 N. Federal	l Highway, Suite 300, Office #29	
	Boca Raton, Fl	_ 33432	
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification: 6/29/2	007 Document number: F	07000003418
	nd street address of the current registe artment of State: (If resigned, enter re	red agent and registered office on file wit signed)	th the
	Autumn Nesbeth, c/o SIG		
	1515 N. Federal Highway, S	Suite 300, Office #29	09 DE
	Boca Raton, FL 33432		AHAC C2
6. The name and (if changed):		l agent (if changed) and /or registered offi	B AM 11: 03 SSEE, FLORIE
	555 South Federal Highway	Suite 400	OA W
		ox NOT acceptable	-
	Boca Raton, FL 33432		_
The street addr as changed wil	ess of its registered office and the sal be identical.	treet address of the business office of its	s registered agent,
Such change wauthorized by t	vas authorized by resolution duly ad the board, or the corporation has bee	opted by its board of directors or by an en notified in writing of the change.	officer so
Signati	ure of an officer or director	Brian Sullivan, Tre	asurer
l further agree of my duties, ar document is be	t the appointment as registered age to comply with the provisions of all nd I am familiar with and accept the ing filed merely to reflect a change is been notified in writing of this cha	t statutes relative to the proper and com e obligation of my position as registered in the registered office address. I hereb	aplete performance d agent. Or, if this by confirm that the
Vai) Klesbern	12/4/04	
,	gnature of Registered Agent ehalf of an entity:	Date	
r signing on or	viidi. Oi tai viitity.		
7	Typed or Printed Name		
	* * * FILING	G FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)