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PHYSICAL OF CORPORATIONS
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RARO Ch8



CORPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE : 130361

7667927

AUTHORIZATION

COST LIMIT

ORDER DATE: March 14, 2012

ORDER TIME : 12:59 PM

ORDER NO. : 130361-014

CUSTOMER NO: 7667927

CHANGE OF AGENT

NAME: INTELLIMARK HOLDINGS INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of cha	ange is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statute. vized under the laws of the State of <u>Delaw</u> ered agent, or both, in the State of Florida	vare	
1. The name of	the corporation: INTELLIMARK HO	LDINGS INC.		
2. The principal	office address: 2050 Spectrum Blvd, 1	Fort Lauderdale FL 33309		
3. The mailing a	address (if different):			
4. Date of incorp	poration/qualification: 02/15/2008	Document number: F080000072	23	_
	d street address of the current registered a rtment of State:	gent and registered office on file with the		
	Corporate Creations Network Inc.			
	11380 Prosperity Farms Road #221	IE .		
	Palm Beach Gardens FL 33410			
6. The name and (if changed):	d street address of the new registered ager	nt (if changed) and /or registered office	DIVIE 12	
	Corporation Service Company		TAR THE	
	1201 Hays Street		一	Ω Ξ
	(P.O. Box NOT acceptable)	PH HOS	
	Tallahassee, FL 32301		STATE	
The street address changed will	ess of its registered office and the street be identical.	address of the business office of its regis	stered ent,	
Such change was authorized by the	as authorized by resolution duly adopted he board, or the corporation has been no	d by its board of directors or by an office of the change.	er so	
Sun .	Bruily	Sean Bradley, Secretary		
I hereby accept I further agree of my duties, an document is bei corporation has	ure of an officer or prector)	(Printed or typed name and title) ad agree to act in this capacity. utes relative to the proper and complete igation of my position as registered ager e registered office address, I hereby con	performance nt. Or, if this firm that the	
~ ~ ·	gnafare of Registered Agent)	3-14->012		
•	•	(Date)		
If signing on be	chalf of an entity:			
	et, Asst. Vice President			
(.	Typed or Printed Name) * * * FILING FE	TF • \$35 AA * * *		
	PILING FE	111. WJJ.VV		

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