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Florida Department of State
Division of Corporations
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From: Account Name : C T CORPORATION SYSTEM
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DIVISION OF CORPORATIONS

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15 APR 17 AM 11:03
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DIVISION OF CORPORATIONS
TALLAHASSEE FLORIDA

**REGISTERED AGENT CHANGE
PERKINS MANAGEMENT SERVICES COMPANY**

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C.L.
4-20-15

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15 APR 17 AM 8:37

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 North Carolina _____ in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Perkins Management Services Company
2. The principal office address: 129 W. Trade St., Suite 1260, Charlotte, NC 28202
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/26/2008 Document number: F08000001363
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)

Scott Gibson

2215 Fogarty Avenue

Key West, FL 33040

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, FL 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.

Nicholas M. Perkins
Signature of an officer or director

Nicholas M. Perkins, President

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: [Signature]
Signature of Registered Agent

4/16/15
Date

If signing on behalf of an entity:

Danny Verdecchia, Jr. Asst. 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)