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

| statement of cha | unge is submitted for a co | orporation organiz | 607.1508, or 617.1508, Flo ed under the laws of the Sta ed agent, or both, in the Sta | nte of | |
|---|--|---|--|---|-------------|
| | | _ | . NETWORKS, INC | · | |
| 2. The principal | office address: 600 HA | ARRISON STR | EET, 4TH FLOOR | | |
| SAN FRAI | NCISCO CA 94107 | | | | |
| 3. The mailing a | address (if different): | | - | | |
| 4. Date of incorp | poration/qualification: | 02/06/2009 | Document number: | F0900000500 | |
| | I street address of the curtiment of State: (If resign | | nt and registered office on f | file with the | |
| | CT CORPORATIO | N SYSTEM | | | |
| | 1200 SOUTH PINE | E ISLAND ROA | .D | | |
| | PLANTATION FL: | 33324 US | | | |
| 6. The name and (if changed): | l street address of the nev | w registered agent (| if changed) and /or register | red office | |
| | Registered Agent S | Solutions, Inc. | | | |
| | 155 Office Plaza D | | | | |
| | | P.O. Box NOT ac | cceptable | | प्रति |
| | Tallahassee, FL 32 | 2301 | | | |
| | | | dress of the business offic | | |
| Such change wa authorized by th | is authorized by resolutive board, or the corporat | on duly adopted b tion has been notif | y its board of directors or ied in writing of the chang Christine Nakag | by an officer so aiwa. Curtis Affairs V Asst Sc | |
| I hereby accept I further agree i of my duties, and document is bein | the appointment as region to comply with the provided I am familiar with and filed merely to reflect been notified in writing the comply to reflect been notified in writing the complete t | istered agent and o sions of all statute d accept the obliga t a change in the r | Printed or typed nam agree to act in this capacity is relative to the proper an attion of my position as regestiered office address, I | ie and title | ٠, |
| _ | half of an entity: | ions, Inc. | Date | | |

* * * 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 (8/05)

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

| statement of cha | nge is submitted for a co | orporation organized | 607.1508, or 617.1508, Flor I under the laws of the State I agent, or both, in the State | e of | |
|--|---|--|---|--|--|
| 1. The name of | the corporation: PREN | MER RETAIL | NETWORKS, INC. | | |
| • - | office address: 600 HA | ARRISON STRE | ET, 4TH FLOOR | | |
| SAN FRAI | NCISCO CA 94107 | <u></u> | | | |
| 3. The mailing a | ddress (if different): | | | | _ |
| 4. Date of incorp | poration/qualification; | 02/06/2009 | Document number: | F09000000500 | _ |
| | street address of the cur timent of State: (If resign | | and registered office on fil | e with the | |
| | CT CORPORATIO | N SYSTEM | | | |
| | 1200 SOUTH PINE | E ISLAND ROAD |) | | |
| | PLANTATION FL | 33324 US | | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | - |
| 6. The name and (if changed): | l street address of the nev | w registered agent (it | f changed) and /or registered | d office | 27 A CS |
| | Registered Agent S | Solutions, Inc. | | - The state of the | 22 |
| | 155 Office Plaza D | | | | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| | Tallahassee, FL 32 | P.O. Box NOT acc 2301 | eptable | | - |
| as changed will | be identical. | | ress of the business office | | |
| Such change was | as authorized by resolution board or the corporate | ion duly adopted by tion has been notific (| its board of directors or bed in writing of the change hristine. Nakaga | y an officer so wa. Curtis | |
| Signatur | e of an ouncer or director | <u>5</u> | Printed or typed name | Affairs V Asst. Sec | ٠, |
| I hereby accept I further agree i of my duties, an document is bei corporation has | the appointment as regi o comply with the provi d I am familiar with and ng filed merely to reflec been notified in writing | istered agent and ag isions of all statutes d accept the obligat it a change in the re g of this change. | gree to act in this capacity relative to the proper and ion of my position as regis gistered office address, I h | complete performance tered agent. Or, if this tereby confirm that the | |
| dit | ArtFlores, | Asst.sec_ | 11/15/2011 Date | | |
| lf signing on bel | half of an entity: | | | | |
| Register | nd Agent Soluti | ions, Inc. | | | |

* * * FILING FEE: \$35:00 * * *

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MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
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