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Account Number : I20000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

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10 AGMUNLEDIE UFROENCY OF REMA

## REGISTERED AGENT CHANGE LVI SERVICES INC.

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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5/22/2012

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

	-	registered office or regis	or car age.m.	or comi, in the		PSA.	
1. The name of	the corporation:	LVI SERVICES INC.					
2. The principal	office address:	150 West 30th Street	8th floor	New York,	NY 10001		
3. The mailing a	ddress (if diffe	rent):					
4. Date of incorp	oration/qualifi	cation: April 23, 2009	Docu	ment number:	F090000016	i63	
	l street address ument of State:	of the current registered a	agent and rep	gistered office o	on file with the	B	
	C T Corpora	tion System					
•	1200 South	Pine Island Road					~>
	Plantation, F	L 33324				ALC SEC	112
6. The name and (if changed):	l street address	of the new registered age	nt (if change	xd) and /or regis	stered office		2012 MAY 22
	Corporation	Service Company				E OF	PH
	1201 Hays S				_	OF STATE	4:
		(P.O. Box NOT acceptable	:)			<b>SE</b>	_
	Tallahassee,	FL 32301			- <del></del>		
The street address changed will	ess of its registe be identical.	ered office and the street	address of	the business of	ffice of its reg	istered age	ent,
Such change wa authorized by th	as authorized by	y resolution duly adopte corporation has been ne	d by its boa otified in w	rd of directors iting of the ch	or by an offic ange.	cer so	
/m/	///h		Gregory	G. DiCarlo		ent	
I hereby accept I further agree to of my duties, an document is beil corporation has	the appointme to comply with d I am familian ng filed merely been notified on Service Co	nt as registered agent at the provisions of all sta with and accept the ob to reflect a change in th in writing of this change	nd agree to tutes relativ ligation of n ne registered		d name and litle) acity. r and complete registered ago s, I hereby co	e performe ent. Or, if nfirm that	ance this the
<b>D</b>	cky Peir	• •	05	<u> </u>			_
	න half of an entit			(Dat	<del>c</del> )		
u=	•	Assistant Vice Pres	ident '	500	• *	٠.	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314