· · · (Requestor's Name)	_			
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
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DEPARTMENT OF STATE DIVISION OF CORPORATIONS TALLAND SEE, FLORIDA

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19/12



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 048672 7863217

AUTHORIZATION (

COST LIMIT

ORDER DATE: January 4, 2012

ORDER TIME : 9:49 AM

ORDER NO. : 048672-004

CUSTOMER NO: 7863217

CHANGE OF AGENT

NAME: TURA INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

statement of change	visions of sections 607.0502, 617.0502 is submitted for a corporation organiz change its registered office or register	ed under the laws of the State of De	elaware
	corporation: TURA, INC.	ea agon, or bonn, in the state of 1 to	
	ce address: 123 Girton Drive, Muno	cy, PA 17756	
3. The mailing addre	ess (if different):		
4. Date of incorpora	tion/qualification: 5/26/2010	Document number: F1000000	2479
5. The name and stre Florida Departme	eet address of the current registered age int of State:	ent and registered office on file with	the
Re	egistered Agent Solutions, Inc.	·	
15	5 Office Place Drive, Suite A		и и с.э і
Ta	Illahassee L 32301	P.	MIZ J
6. The name and stre (if changed):	eet address of the new registered agent	(if changed) and /or registered office	SIX G
Co	orporation Service Company		OF STATE
120	01 Hays Street		IZ: 00
•	(P.O. Box NOT acceptable)		
Ta	llahassee, FL 32301		
The street address o as changed will be i	of its registered office and the street addentical.	ddress of the business office of its r	egistered agent,
Such change was au authorized by the bo	uthorized by resolution duly adopted loard, or the corporation has been not	by its board of directors or by an of fied in writing of the change.	ficer so
Maure	_ Cethelf	Maurcen Cathell, Vice Presiden	nt
(Signature of	an officer or director)	(Printed or typed name and title)
I hereby accept the a I further agree to come of my duties, and I a document is being ficorporation Security Security 19	appointment as registered agent and omply with the provisions of all statut am familiar with and accept the oblig iled merely to reflect a change in the notified in writing of this change. Service Company	agree to act in this capacity. es relative to the proper and compl ation of my position as registered a registered office address, I hereby o	ete performance igent. Or, if this confirm that the
-	eren attel	01/02/2012	
	re of Registered Agent)	(Date)	
If signing on behalf	of an entity:		
Grace E. Kirby, A	Assistant Vice President		
(Typed	or Printed Name)		
	* * * CH INC CCC	. \$25.00 * * *	

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