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CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE : 058915

AUTHORIZATION

COST LIMIT

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ORDER DATE: January 12, 2012

ORDER TIME: 9:46 AM

ORDER NO. : 058915-015

CUSTOMER NO: 7684266

CHANGE OF AGENT

NAME: CONESE ENTERPRISES, LTD.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

EXAMINER'S INITIALS:

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this inge is submitted for a corporation organized under the laws of the State of Delaware er to change its registered office or registered agent, or both, in the State of Florida.							
1. The name of	the corporation: CONESE ENTERPRISES, LTD., INC.							
2. The principal 650 Casuar	rina Concourse, Coral Gables, FL 33143							
3. The mailing a	address (if different):							
4. Date of incorp	poration/qualification: 08/09/2010 Document number: F10000003574							
	d street address of the current registered agent and registered office on file with the rtment of State:							
	Corporate Access Inc.							
	236 E. 6th Avenue							
	Tallahassee, FL 32303							
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):								
	Corporation Service Company							
	1201 Hays Street							
	(P.O. Box NOT acceptable)							
The street addre	Tallahassee, FL 32301 ess of its registered office and the street address of the business office of its registered agent, be identical.							
_	as authorized by resolution duly adopted by its board of directors or by an officer so he board, or the corporation has been notified in writing of the change.							
Surgery (Signatu	Conesif VP Eugene F. Converse JR, Vini Printed or typed name and title)							
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ing filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.							
By:	on Service Company One 3-2-2012 gnature of Registered Agent) (Date)							
If signing on be	half of an entity:							
	y, Asst. Vice President							
Ţ	Typed or Printed Name)							

* * * FILING FEE: \$35.00 * * *