## F100000004297

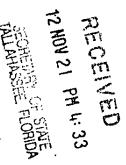
(Requestor's Name)				
(Ad	dress)	<u> </u>		
<b>(</b> -	,			
(Ad	dress)			
(Cit	y/State/Zip/Phone	<b>⇒</b> #)		
PICK-UP	WAIT	, MAIL		
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TALLAHASSEE, FLORIDA

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ERM CERTIFICATION & VERIFICATION SERVICES

**INCORPORATED** 

TYPE OF FILING: CHANGE OF AGENT

COST:

35.00

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ACCOUNT: FCA00000015

**AUTHORIZATION:** 

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

statement of cha	provisions of sections 607.0502, 617.05 nge is submitted for a corporation orgo r to change its registered office or regis	nized under the laws of the State	e of Delaware	
1. The name of t	he corporation: ERM CERTIFICAT	ION & VERIFICATION SERV	ICES INCORPORATED	
	office address: ndy Hill Road, Suite 1500W		GA 30339	
•	ddress (if different):  Golf Road Suite 1-1000	Rolling Meadows	IL 60008	
4. Date of incom	poration/qualification: September 23	<del>-</del>		
	I street address of the current registered tment of State: (If resigned, enter resigned)		ile with the	
	C T Corporat	ion System	_ Fee E	
1200 South Pine Island Road				
	Plantation,	FL 33324	SSER	
6. The name and (if changed):	street address of the new registered ag  National Corporate Res		NOV 21 PM 4: 56 ECRETARY OF STATE ALLAHASSEE, FLORIDA	
	155 Office Plaza Drive			
	Tallahassee, FL 3230	OT acceptable		
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.				
I hereby accept I further agglee performance of agent. Or, if the hereby confirm	the appointment as registered agent at the appointment as registered agent at a comply with the provisions of all start and the appointment as registered agent at a comply with the provisions of all start and a	Mehran Bayram Printed or typed name to and agree to act in this capacity, attutes relative to the proper and accept the obligation of my no	and title	
cy Kose i	Assistant Secretary			

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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