F11000000492

(Reques	stor's Name)		
(Addres	s)		
(Addres	s)		
(City/Sta	ite/Zip/Phone	· #)	
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DEC 20 2011

EXAMINER



ACCOUNT NO. : I2000000195

REFERENCE : 028650 7861264

AUTHORIZATION :

COST LIMIT

ORDER DATE: December 16, 2011

ORDER TIME : 9:50 AM

ORDER NO. : 028650-003

CUSTOMER NO: 7861264

CHANGE OF AGENT

NAME: VALUED RELATIONSHIPS, 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 cha	unge is submitted for a corporation orgo	502, 607.1508, or 617.1508, Florida Statu anized under the laws of the State of Ohic stered agent, or both, in the State of Floria)	
1. The name of t	the corporation: VALUED RELATI	ONSHIPS, INC.		
	office address: 1400 Commerce Cer			
3. The mailing a	nddress (if different):			
4. Date of incorp	poration/qualification: 02/03/2011	Document number: F110000004	192	
	d street address of the current registered thent of State:	agent and registered office on file with the	3	
	Torrence, Darren			
	14241 Perdido Beach Blvd #10E			
	Pensacola, FL 32507			
6. The name and (if changed):	I street address of the new registered ago	ent (if changed) and /or registered office	11 D	
	Corporation Service Company	· 	DEC 20 PM 12: 3	
	1201 Hays Street	le)	20 PP	
			F. S. F. S.	
			Z: 3	
The street addre as changed will	ess of its registered office and the stree be identical.	et address of the business office of its reg	isicred agent,	
Such change wa authorized by th	is authorized by resolution duly adoptive board, or the corporation has been r	ed by its board of directors or by an offic otified in writing of the change.	er so	
Ma		Maureen Cathell, Vice President (Printed or typed name and title)		
I hereby accept I further agree to of my duties, and document is bein corporation has Corporatic	the appointment as revistered agent a	••	e performance 2nt. Or, if this nfirm that the	
By: Signature of Registered Agent)		December 15, 2011 (Date)		
0	half of an entity:	(sour)		
	et, Asst. Vice President			
	yped or Printed Name)			

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

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