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Per



IJUL 25 2012 C. MUSTAIN



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 12000000195

REFERENCE : 28,1394

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: July 19, 2012

ORDER TIME : 9:50 AM

ORDER NO. : 281394-007

CUSTOMER NO: 7892253

CHANGE OF AGENT

NAME:

ATLANTIC MANAGEMENT CENTER,

INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

__ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

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

statement of cha		607.1508, or 617.1508, Florida Statutes, this ed under the laws of the State of Virginia ed agent, or both, in the State of Florida.	
1. The name of t	he corporation: ATLANTIC MANAGE	EMENT CENTER, INC.	
2. The principal	office address: 1800 Diagonal Road, Su	uite 600, Alexander, VA 22314	
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 04/03/2012	Document number: F12000001442	
	street address of the current registered age timent of State:	ent and registered office on file with the	
	Incorp Services, Inc.	70	
	17888 67th Court N		
	Loxahatchee, FL 33470		
Loxahatchee, FL 33470 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)		
	Tallahassee, FL 32301		
The street address changed will	ess of its registered office and the street ac be identical.	ddress of the business office of its registered agent,	
Such change wa authorized by th	as authorized by resolution duly adopted the board, or the corporation has been noting	by its board of directors or by an officer so fied in writing of the change.	
	ever Cafael	Maureen Cathell, Vice President	
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and to comply with the provisions of all statuted I am familiar with and accept the obliging filed merely to reflect a change in the been notified in writing of this change. The company of this change in Service Company of the company of the change.	(Printed or typed name and title) agree to act in this capacity. es relative to the proper and complete performance ation of my position as registered agent. Or, if this registered office address, I hereby confirm that the	
Bx: J	u ext	July 18, 2012	
	gnature of Registered Agent)	(Date)	
	half of an entity:		
	y, Assistant VP Typed or Printed Name)		
ζ,	. , pad at thinou thinky		

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