

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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## REGISTERED AGENT CHANGE ZILLOW VENTURES, INC.

Certificate of Status	0
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JUL 1 3 2015 C McNAIR 7/10/2015

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

statement of cha	nge is submitted for a corporation o	7.0502, 607.1508, or 617.1508, Florida S organized under the laws of the State of _ egistered agent, or both, in the State of F	WA	
1. The name of t	he corporation: Zillow Ventures, Inc.			
	office address:	98101		
3. The mailing a	ddress (if different):			
4. Date of incom	poration/qualification: 2/9/2015	Document number: F1500000	00511	
	I street address of the current registe timent of State: (If resigned, enter re-	red agent and registered office on file wisigned)	ith the	
	NRAI Services, Inc.			
	1200 South Pine Island Road			
	Plantation, Florida 33324		<b>3</b> 5	
6. The name and (if changed):	d street address of the new registered	d agent (if changed) and /or registered of	Tice JUL 10	15.2°
	C T Corporation System	, property		
	c/o C T Corporation System, 1200 So		9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	
	P.O. Box Plantation, Florida 33324	NOT acceptable	52	
The street address changed will	ess of its registered office and the st be identical.	treet address of the business office of it	s registered agent	,
Such change was authorized by the	as authorized by resolution duly add ne board, or the corporation has bee	opted by its board of directors or by an en notified in writing of the change.	officer so	
efem be		7/10/2015		
_	re of an officer or director	Printed or typed name and tit		
I hereby accept I further agree performance of agent. Or, if th hereby confirm	the appointment as registered age; to comply with the provisions of all my duties, and I am familiar with a is document is being filed merely to that the corporation has been notif	nt and agree to act in this capacity, I statutes relative to the proper and con and accept the obligation of my position o reflect a change in the registered offic fied in writing of this change.	npleie 1 as registered 2e address, l	
By: C T Got	poration System	7/10/2015	_	
(/ `	half of an entity:	Date		
James Halpin, A				
1	yped or Printed Name			

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

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