

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

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Account Name : CORPORATE CREATIONS CHICAGO, L.L.C

Account Number : 110450001334 : (773)935-3920 Phone Fax Number

: (773)935-4020

REGISTERED AGENT CHANGE

F & M MAFCO, INC.

strente transcommunication (中央の一部の1985年) - 「中央の1985年)。 「中央の1985年)、「中央の1987年)、日本の1987年)、「中央の1987年)、日本の1987年)、日本の1987年)、日本の1987年)、日本の1987年)、日本の1987年)、日本の1987年)、日本の1987年)、日本の198	(E-MCORM) MICHOLOGIANISH-A-MAM
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this tange is submitted for a corporation organized under the laws of the State of Ohio der to change its registered office or registered agent, or both, in the State of Florida.	
1 The rame of	f the corporation: F & M MAFCO, INC.	_
2. The principa	al office address: 403 MAGUIRE RD. EXTENSION	
z. ino principa	OCOEE FL 34761	
3. The mailing	address (if different): P.O. BOX 11013, CINCINNATI, OH 45211 - 1113	
4. Date of inco	prporation/qualification: 03/03/1995 Document number: F95000001025	+
	nd street address of the current registered agent and registered office on file with the artment of State:	A 7 1
	C T CORPORATION SYSTEM 全語	P
	1200 S. PINE ISLAND RD.	23
	PLANTATION FL 33324	모
6. The name ar (if changed):	and street address of the new registered agent (if changed) and /or registered office	2:46
	Corporate Creations Network Inc.	-!:
	11380 Prosperity Farms Road #221E	
	(PO. Box NOT acceptable)	
	Palm Beach Gardens, FL 33410	
	ress of its registered office and the street address of the business office of its registered agent, ill be identical.	K' "
_ James	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. **Aprels C. ZEISLER CHIEF FINANCIAL OFFICE OF BUTCH OF THE CONTROL O	ER
I hereby accept I further agree of my duties, as document is be corporation ha	of the appointment as registered agent and agree to act in this capacity. It to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this sing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change.	
	ignature of Registered Agent) Agent 17, 2007 (Chaire)	
If signing on be	ehalf of an entity:	
Alisen J.	Rea bb. U.Co Picsi Lent Typed or Printed Name)	
•	* * * FILING FEE: \$35.00 * * *	
	MAKE CHECKS PAVADI E TO EL ODIDA DED COMO OD DO	
M. CR2F045 (8/05)	IAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314	

CR2E045 (8/05)