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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nam	e)
(Do	ocument Number)	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
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Charge

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ASP 108



TION SERVICE COMPANY.
ACCOUNT NO. : 072100000032
REFERENCE : 798-0.60 7676334
AUTHORIZATION: Spelle man
COST LIMIT : \$ 35.00
ORDER DATE: November 24, 2008
ORDER TIME : 9:02 AM
ORDER NO. : 793060-005
CUSTOMER NO: 7676334
CHANGE OF AGENT
NAME: JESSICA MCCLINTOCK, INC.
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY
CONTACT DEPSON. Carina Dunlan
CONTACT PERSON: Carina Dunlap
EXAMINER'S INITIALS:

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

statement of ohe	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this whange is submitted for a corporation organized under the laws of the State of California derived to change its registered office or registered agent, or both, in the State of Florida.	
	of the corporation: JESSICA MCCLINTOCK, INC.	
2. The principal	pal office address: 1400 16th Street, San Francisco, CA 94103	
3. The mailing a	g address (if different):	
4. Date of incorp	prporation/qualification: 04/04/1996 Document number: F960000001704	
	and street address of the current registered agent and registered office on file with the partment of State:	
	C T Corporation System	
	1200 South Pine Island Road	7
	Plantation, FL 33324	
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office :	C
	Corporation Service Company	
	1201 Hays Street	
	(P.O. Box NOT acceptable)	
	Tallahassee, FL 32301	
The street address changed will	lress of its registered office and the street address of the business office of its registered agential be identical.	ıt,
Such change wa	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.	
May (Signate	Maureen Cullen, Attorney In Fact (Printed or typed name and title)	
I hereby accept I further agree i of my duties, an document is bei corporation has Corporal	ot the appointment as registered agent and agree to act in this capacity, eto comply with the provisions of all statutes relative to the proper and complete performan and I am familiar with and accept the obligation of my position as registered agent. Or, if the eing filed merely to reflect a change in the registered office address, I hereby confirm that the as been notified in writing of this change. ation Service Company	ce iis ie
By:	Signature of Register of Agent) (Date)	-
•	pehalf of an entity:	
Sylvia Quep	eppet, Asst. VP	
T)	(Typed or Printed Name)	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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