

L020000009325

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

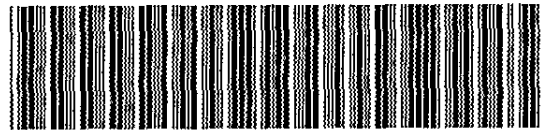
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

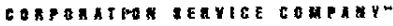
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FILED
03 SEP 30 PM 1:28
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
03 SEP 30 PM 10:56

BK



COST LIMIT : \$ 25.00

ORDER DATE : September 22, 2003

ORDER TIME : 8:46 AM

ORDER NO. : 251040-015

CUSTOMER NO: 4324403

CUSTOMER: Ms. Mary Farruggio
National Medical Health Card
26 Harbor Park Drive

Port Washington, NY 11050

CHANGE OF AGENT

NAME: POP DEVELOPMENT LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
 XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Mimi Replogle -- EXT#

EXAMINER:

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR
BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited liability company is: POP DEVELOPMENT LLC

2. The mailing address of the limited liability company is : _____

26 Harbor Park Drive, Port Washington, NY 11050

April 18, 2002

E02000009325

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

NRAI Services

Name

526 E. Park Avenue

Address

Tallahassee, FL 32301

City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee

FL

32301

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

(Signature of a member or authorized representative of a member)

Bert E. Brodsky

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent) Marva L. Williams, Assistant Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314