## L02000077782

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JEPARTIENT OF STAT

T. CLINE ALCOHOLAR - 1 SECRETARY SECRETARY STATE OF THE STATE OF THE SECRETARY SECRETA



ACCOUNT NO. : I2000000195

REFERENCE: 119676

7851416

AUTHORIZATION :

COST LIMIT : \$ 2

ORDER DATE: March 5, 2012

ORDER TIME : 9:20 AM

ORDER NO. : 119676-077

CUSTOMER NO: 7851416

CHANGE OF AGENT

NAME: RANDALL HOUSE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce -- EXT# 2919

EXAMINER:

12 MAR - 7 MAY 9: 45
COMPLARY DE STATE
LAHASSEN, FLBRIGA

## 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 company submits the following statement in order to chan in the State of Florida.	B, Florida Statutes, the undersign ge its registered office or registe	ned limited liability red agent, or both,	
1. Name of the limited liability company: RANDALL Ho	OUSE LLC		
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	: 424 North Calhoun Street Tallahassee, FL 32301-1230		
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
10/21/2002	L02000027782		
3. Date of filing/registration in Florida	4. Document number		
5. (a) Registered Agent and Registered Office shown on the	he records of the Florida Dept. of	f State:	
Registered Agent:	Robert A. Pierce		
Registered Office Address:	123 South Calhoun Street Tallahassee, FL 32301-1517	78 78 78 78 78 78 78 78 78 78 78 78 78 7	
		7. S	
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:			
NEW Registered Agent:	Corporation Service Company		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street		
	Tallahassee ,FI	L 32301	
If the limited liability company is not organized under the I that after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the can hereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member or authorized representative of a member)	t address of the registered office a use of a Florida limited liability co y an affirmative vote of the mem	and the business ompany, it is bers of the limited	
Maureen Cathell, Authorized Person (Printed or typed name of signee)	-		
I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the proam familiar with and accept the obligations of my position of F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified by:  (Signature of Registered Agent) Corporation Service Company	gree to act in this capacity. I furt per and complete performance of as registered agent as provided fo hange in the registered office add in writing of this change. Grace E. Kirby, Asst. VP	her agree to f my duties, and I or in Chapter 608, tress, I hereby	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314			

FILING FEE: \$25.00