LOSCO	02017
(Requestor's Name) (Address)	900241839659
(Address) (City/State/Zip/Phone #)	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	DEPARTNER 13 JAN - 2
Special Instructions to Filing Officer:	PH 4:23
Office Use Only	13 JAN - 2 AN ALLARASSEE F

.

- -

• • • • • • • • •

Josh 1/3/13

-

.

ŀ

|

: ļ

| |-| | | |



CORPORATION SERVICE COMPANY'

۰..

÷

;

	ACCOUNT NO.	:	I2000000195
	REFERENCE	:	481087 7914784
	AUTHORIZATION	:	Sprindenan
	COST LIMIT	:	\$ 25.00
ORDER DATE :	December 31, 2012	2	
ORDER TIME :	3:49 PM		
ORDER NO. :	481087-033		· ·
CUSTOMER NO:	7914784		

CHANGE OF AGENT

NAME: O.R. COLAN CORPORATE, LLC

- - - -

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPYXXPLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes -- EXT# 52920

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. Name of the limited liability company: O.R. COLAN CORPORATE, LLC

2. (a) Principal office address of limited liability co (Note: MUST BE STREET ADDRESS)	ompany: 11111 Carmel Commons Boulevard Suite 410
	-Charlotte-NC 28226
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	11111 Carmel Commons Boulevard
	Suite 410
	_Charlotte NC 28226
04/03/2003	L03000012017
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office show	wn on the records of the Florida Dept. of State:
Registered Agent:	NRAI Services Inc.
Registered Office Address:	515 E. Park Avenue
5	Tallahassee FL 32301
	مند المنظر ا المنظر المنظر
(b) Enter name of NEW Registered Agent and/	or NEW Registered Office address

 NEW Registered Agent:
 Corporation Service Company

 NEW Registered Office Address:
 1201 Hays Street

 (MUST BE FLORIDA STREET ADDRESS)
 1201 Hays Street

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.

Tallahassee

FL 32301

leves

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

Deb Reeves, Authorized Person (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.

By: Sarah Weismo

(Signature of Registered Agent) Corporation Service Company Sarah Wright, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallabassee, FL 32314 FILING FEE: \$25.00

INHS18 (05/08)