LU400004687

(Requestor's Name)
·
(Address)
(Address)
_
(Address)
(0), (0), (7), (9)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
·
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800189631678

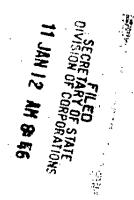
11 JAN 1/2 PH 4: 11

DEPARTMENT OF STATE

DIVISION OF CORPORATIONS
TALL ANASSEE, FLORING

B. KOHR

JAN 1 3 2011
EXAMINER





ACCOUNT NO. : I2000000195 REFERENCE : 639279 7760220 AUTHORIZATION ORDER DATE: January 11, 2011 ORDER TIME : 3:34 PM ORDER NO. : 639279-015 CUSTOMER NO: 7760220 CHANGE OF AGENT NAME: PARTNERSINSCRIBE, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY ____ PLAIN STAMPED COPY CONTACT PERSON: Doreen Wallace -- EXT# 2928

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: PARTNERS	INSCRIBE, LLC	
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	: _6802 Energy Court _Sarasota, FL 34240	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	6802 Energy Court Sarasota, FL 34240	
01/16/2004	L0400004687	
3. Date of filing/registration in Florida5. (a) Registered Agent and Registered Office shown on	4. Document number	
Registered Agent:	C T Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
(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 ,FL 32301	
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)		
(Printed or typed name of signee)	· -	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the prime familiar with and accept the obligations of my position S.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified Corperation Service Company	gree to act in this capacity. I further agree to pper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby I in writing of this change.	

(Signature of Registered Agent) Sylvia Queppet, Asst. Vice President

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