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61 119 6. HUNT C7/25/24 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

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	REFERENCE	:		8435053			
	AUTHORIZATION	:	Cropped	Elman			
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PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

NAME: REFERRAL NETWORK LLC

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Miller -- EXT#

EXAMINER:

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

2. (a)  Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)  175 PARK AVE.  MADISON, NJ 07940  07/02/2007  107000069833  3. Date of filling/registration in Florida 4. Document number  5. (a)  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  CORPORATE CREATIONS NETWORK, INC.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  801 US HIGHWAY 1  NORTH PALM BEACH  FL 33408  (b)  Enter name of NEW Registered Agent and/or NEW Registered Office 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 Plorida 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 pol organization or the operating agreement of the limited liability company.  Signature of a penther or authorized agreement of the limited liability company.  Signature of a penther or authorized agreement of the limited liability company.  Signature of a penther or authorized agreement of the limited liability company.  FLORIDA Signature of a member of the provisions of all statings registered agent am provided for in Chapter 6015, FS. Or, if this damage in the registered agent am provided for in Chapter 6015, FS. Or, if this damage in the provisions of all statings registered agent am provided for in Chapter 6015, FS. Or, if this damage in the member of the obligations of any position as registered agent am provided for in Chapter 6015, FS. Or, if this damage in the obligations of any position as registered agent am provided for in Chapter 6015, FS. Or, if this damage in the obligations of all statings relative to the proper and complete perfor	1. Na	ame of the limited liability company: REFERRAL N	ETWORK	LLC					
Principal office address of limited liability company: (Nate: MLNS BE STREET ADDRESS)  175 PARK AVE.  MADISON, NJ 07940  07/02/2007  L07000069833  3. Date of filing/registration in Florida  4. Document number  5. (a)  Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  CORPORATE CREATIONS NETWORK, INC.  Registered Office Address (MUST BE FLORIDA STREET ADDRESS)  801 US HIGHWAY 1  NORTH PALM BEACH  FL  133408  (b)  Enter name of NEW Registered Agent and/or NEW Registered Office address:  1201 Hays Street  Tallahassee  FL  16 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  Thereby accept the appointment as registered agent and agree to act in this capacity.   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 am provided from the Innited liability company has been notified in writing of this obnage.									
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GRACE E. KIRBY, ASST. VICE PRESIDENT	I herei provisi the obl to mere notified	by accept the appointment as registered agent and as ons of all statutes relative to the proper and completi- igations of my position as registered agent as provid Iv reflect a change in the registered office address. I I in writing of this change.	ree to act e perform ed for in C hereby co	in this c ince of n hapter ( infirm th	apacity. I furthe ny duties, and I a 505, F.S. Or, if t aat the limited lia	r agree to m familio his docun bility con	comp ir with nent is ipany	oly with the and accept being filed has been	
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