L09000034462

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Filone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entity Numb)
(Document Number)
Certified Copies Certificates of Status
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B. KOHR FEB 1 8 2010

EXAMINER

SEURETARY OF STATE
DIVISION OF CORPORATIONS

10 FEB 18 PM 2: 50



IN SERVICE	COMPANY.						4
		ACCOUNT NO.	:	120000	000195		OR
		REFERENCE	:	287631	· //	68825	′<
		AUTHORIZATION	:	Syner	Selen	an	
		COST LIMIT	:	\$ 25.0	ίο		
ORDER I	DATE :	February 17, 20	10				
ORDER 7	TIME :	9:29 AM					
ORDER 1	10. :	287631-115					
CUSTOME	ER NO:	7468825					
		CHANGE OF	AGEI	<u>IT</u>			
	272.5477	7777777		*******			
	NAME:	RELIANCE-SCC	TT (CARVER,	LLC		
PLEASE	RETURN	THE FOLLOWING A	S PF	ROOF OF	FILING:		
xx	-	FIED COPY STAMPED COPY					
<u>uu</u>	" ETIVIIA	DIMMEED COLI					

CONTACT PERSON: Heather Chapman -- EXT# 2908

EXAMINER:

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

COL	npa	ant to the provisions of sections 008.410 or 608.308 my submits the following statement in order to chan State of Florida.	ge its registered office or registered agent, or bat					
1.	Nar	ne of the limited liability company: RELIANCE	SCOTT CARVER, LLC					
2.	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	20 Battery Park Avenue, Suite 305 Asheville, NC 28801					
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	20 Battery Park Avenue, Suite 305 Asheville, NC 28801					
04	1/00	6/2009	L09000034462					
3.	Dat	e 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:						
		Registered Agent:	Robert O. Jackson					
		Registered Office Address:	805 E. Broward Boulevard Sutie 200 Ft. Lauderdale, FL 33301					
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : <u>NEW Registered Agent</u> : <u>Corporation Service Company</u>							
		NEW Registered Office Address:	1201 Hays Street					
		(MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301					
tha off her liat lim	t affice of the control of the contr	imited liability company is not organized under the ler the change or changes are made, the Florida street of the registered agent will be identical. Or, in the car confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	address of the registered office and the business se of a Florida limited liability company, it is					
(Pri	nted	ca Lozada, Authorized Person or typed name of signee)						
		by accept the appointment as registered agent and any with the provisions of all statutes relative to the provision of all statutes relative to the provision of this document is being filed to merely reflect a continuity of the limited liability company has been notified by poration Service Company has been notified of Registered Agent) Grace E. Kirby, Assistant VP	gree to act in this capacity. I further agree to per 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 in writing of this change.					

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