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1.0

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

Na	me of the limited liability company:	AMERICAN PUR	CHAS	ING	SERVIC	ES, LLC			, ,		
•	10315 USA Today Way			(b) _							
(a) .	Principal office address of limited liab (Note: MUST BE STREET AL			(0) _		Mailing address of limited liability company: (Note: MAY RE POST OFFICE BOX)					
	Miramar, FL 33025		_	_							
	08/29/2010			· L	10000091	535					
	Date of filing/registration in	Florida	4.			Documer	at num	ber	•		
, ,,,	AKHIL K AGRAWAL									•	
(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of Stat										
(b)	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					-	,				
	10315 USA Today Way					<u> </u>	:	i		•	
	Miramer .	, FL	33025			_	• •		0		
	C T Corporation System	-							CF 30		
(5)	Enter name of NEW Registered Agent and/o	r NEW Registered	Office	nddri	#J:	•			رسي		
		•								ية الصب 9 حمدية	
	NEW Registered Office Address:			٠			•	. :	<u>د</u> ار رن		
	1200 South Pine Island Road										
	Plantation	FI	33324	ļ							
cha nt v we arti	imited liability company is not organiange or changes are made, the Florida will be identical. Or, in the case of a fere antihorized by an afformative vote icles of brganization or the operating atture of member or authorized representative.	street address of florida limited li- of the members of agreement of the	the reability of the l	giste com limite	red offic pany, it ed liabili	e and the is hereby of ty compar	busine confirmity or a	ess officences of the	ce of the at the ch wise pro	e registered ange(s) ovided in	
ere ovisi obi ner ifie	by accept the appointment as register ions of all statutes relative to the proplet in the proplet in the registered of the proplet in the registered of in writing of this change. C T Corporation System The of Registered Agent Kimberly Bo	ed agent and age er and complete agent as provide office address, I	ree to perfo d for i hereby	act ii rman in Ch v con	n this cap ace of my apter 60 firm that				- 12	Jennis Ger ly with the and accept being filed ias been	

Division of Curporations P.O. Box 63270 Tallahassee, FL 32314 FILING FEE: \$25.00