## 

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## 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.

1. Na	ame of the limited liability company: BEYOND Co	OMMERCIAL, LLO	) 
2. (a)			
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	1615 Woodward Street	P.O	. BOX 7
	Orlando, FL 32803	Win	iter Park, FL 32790
	10/26/2010	L100	00112015
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
J. (a)	Registered Agent and Registered Office shown on the record ASSURED COMPLIANCE SERVICES, LLC	ls of the Florida Dept.	of State:
	Registered Office Address (MUST BE FLORIDA STRE 1615 WOODWARD STREET	ET ADDRESS)	<del></del>
	ORLANDO	32803	<del></del>
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Regist</u> Corporation Service Company	ered Office address:	ZOZH DEC
	NEW Registered Office Address:		
	1201 Hays Street		8 · · · · · · · · · · · · · · · · · · ·
	Tallahassee	, FL_32301	PH 4: 47 SSEE. FL
change agent v was/w	imited liability company is not organized under the corchanges are made, the Florida street address of will be identical. Or, in the case of a Florida limite ere authorized by an affirmative vote of the membeicles of organization or the operating agreement of	the registered offi d liability companers of the limited li	of Florida, it is hereby confirmed that after the ice and the business office of the registered y, it is hereby confirmed that the change(s) iability company or as otherwise provided in
/s/ P	Philip K. Calandrino	Philip K. (	Calandrino, Authorized Person
_	ture of a member or authorized representative of a member	· · · · · · · · · · · · · · · · · · ·	Printed or typed name of signee
I here provisi the ohi to mer notified	hy accept the appointment as registered agent and ions of all statutes relative to the proper and compl ligations of my position as registered agent as prov ely reflect a change in the registered office address d in writing of this change.	agree to act in thi lete performance o ided for in Chapta s. I hereby confirm	is capacity. I further agree to comply with the of my duties, and I am familiar with and accept or 605, F.S. Or, if this document is being filed a that the limited liability company has been
Signatu	Inc. CKubly  Ire of Registered Agent	GRACE E. KIRI	BY, ASST. VICE PRESIDENT