Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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LLC REGISTERED AGENT CHANGE VALUECENTRIC, LLC

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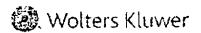
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COVER MESSAGE

Thank You,

Aubrey Weibel **Fulfillment Specialist** CT Corporation

Team (614) 280-3338 GlobalFuffillmentTeam@wolterskluwer.com



1209 N Orange Street Wilmington, DE 19801 www.wolterskluwer.com

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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. N	ame of the limited liability company: ValueCentric	, LLC		
2. (a)	3530 Kraft Road	/b	3530 K	raft Road
, ,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Suite 202	(0	Suite 20	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Naples, Florida 34105			
	representation of the second o	····	napies,	Florida 34105
	November 5, 2010	l	.100001	15637
3.	Date of filing/registration in Florida	4.		Document number
5. (a)	Lyons, Patricia			
. ,	Registered Agent and Registered Office shown on the records of 3530 Kraft Road	the Florida I	Dept. of Stat	
	Registered Office Address (MUST BE FLORIDA STREET) Suite 202	ADDRESS)		19 JA - 3 Z
	Naples	34105		17
(b)	C T Corporation System Enter name of NEW Registered Agent and/or NEW Registered	Office add:	.640.	SSECTION
	1200 South Pine Island Road			. 55
	NEW Registered Office Address:			¥
	Plantation, FL.	33324		
agent w was/we:	mited liability company is not organized under the law inge or changes are made, the Florida street address of ill be identical. Or, in the case of a Florida limited lia re authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	the registe shifity com f the limit limited lia	ered office pany, it is ed liability bility com	and the business office of the registered is hereby confirmed that the change(s)
Signan	are of a member or authorized representative of a member	Eric (Sherbet	
l hereb provisio he oblig a merci notified	y accept the appointment as registered agent and agre ors of all statutes relative to the proper and complete p gations of my position as registered agent as provided by reflect a change in the registered office address. I h in writing of this change.	ee to act in performan i for in Ch tereby con	i this cape ce of my i apter 605 firm that i	Printed or typed name of signee active. I further agree to comply with the luties, and I am familiar with and accept if S. Or, if this document is being filed the limited liability company has been
	Kimberly Laughrey - Assis	stant St	SOIGIA	y