Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Number : FCA000000023

Account Name : C T CORPORATION SYSTEM

Phone

: (850)222-1092

Fax Number

: (850)878-5368

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one smail address please. **

Email	Address:	

LLC REGISTERED AGENT CHANGE IAS HOLDINGS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$55.00

J. SAULSBERRY **EXAMINER**

NOV 1 7 2011

COVER LETTER

TO:	Amendment So Division of Co						
SUBJI	ECT: <u>IAS Ho</u>	oldings, LLC Name	e of Curporatio	, a		-	
DOCU	MENT NUMB	ER: L11000004820				_	
The en	closed Statemen	t of Change of Registered	Office/Agent a	nd fee m	re submitted for	filing.	
Please	return all corres	pondence concerning this	matter to the fo	llowing:			
		Sandy Brunner Name	of Contact Pers	on			
		Databank IMX LLC	imi/Company			2011 SEC TALL	
		620 Freedom Busines	s Center, Sulte Address	120_		DII NOV 16 J SECRETARY O ALLAHASSEE	
	_	King of Prussia, PA 19 City/S	9406 Taile and Zip Co	ide		AM 8: 21 OF STATE FLORIO	
	E-1	sbrunner@databankin nail address: (to be usec	nx com i for future an	пиа) гер	ort notification	n)	
For fu	rther information	concerning this matter, p	lease cail:				
Sai	ndy Brunner Name o	f Contact Person	ut (<u>6</u> A	10 es Code) 233-0251 & Daytime Te	lephone Number	
Enclos	sed is a \$35.00 cl	neck made payable to the l	Department of	State			
		Mulling Address: Amendment Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314		Amend Division Clifton	Address: dment Section on of Corporate Building		

Tallahassee, FL 32301

CR2E045 (8/05)

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

Pursuant to the provisions of sections 608.416 or 608.508, 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. Name of the limited liability company: IAS Holdings, LLC 900 S. Goldenrod Road, Suite C. 2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) Orlando, FL 32822 same as above (b) Mailing address of limited liability company; (Note: MAY BE POST OFFICE BOX) 1/12/2011 L11000004820 3. Date of filing/registration in Florida Document number of State 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. CRAMER, CHARLES W Registered Agent: 1411 EDGEWATER DRIVE SUITE 200 Registered Office Address: ORLANDO FL 32804 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: C T Corporation System **NEW** Registered Agent: 1200 South Pine Island Road **NEW** Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) Plantation FL 33324 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 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 sperating agreement of the limited liability company. Signature of a member or authorized representative of a member Herpster Printed or typed name of signed I hereby accept the appointment as registered agent and agree to act in this capacity. I 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 as provided for in Chapter 608, F.S. Or, if this document is hemotiled to make the registered office address, I hereby confirm that the limited lighting company has been notified in writing of this change.

C 1 Corporation System

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

Assistant Secretary

C T Corporate Signature of Registered Agent