## 111000117144

| (Re                                     | questor's Name)  |      |  |
|-----------------------------------------|------------------|------|--|
| (Address)                               |                  |      |  |
| (Ad                                     | dress)           |      |  |
| (Cit                                    | y/State/Zip/Phon | e #) |  |
| PICK-UP                                 | ☐ warr           | MAIL |  |
| (Business Entity Name)                  |                  |      |  |
| (Document Number)                       |                  |      |  |
| Certified Copies                        |                  |      |  |
| Special Instructions to Filing Officer: |                  |      |  |
| Special Instructions to                 | Uln              |      |  |

Office Use Only



900235128189

2012 MAY 18 AM ID: 45
SECRETARY OF STATE
ANASSEE, FLORID

FILED
2012 MAY 18 AM 8: 12
SECRETARY OF STATE

J. SAULSBERRY EXAMINER MAY 21 2012



ACCOUNT NO. : 12000000195

REFERENCE: 96

7854524

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: November 3, 2011

ORDER TIME : 5:41 PM

ORDER NO. : 968436-005

CUSTOMER NO: 7854524

CHANGEOFAGENT

DOMESTIC AMENDMENT FILING

NAME: FLORIDA SUPPORT SERVICES LLC

LAH.

2012 MAY 18 AH 8

EFFECTIVE DATE:

XX CHANGE OF AGENT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
X PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Becky Peirce -- EXT# 2919

EXAMINER'S INITIALS:

## 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: FLORIDA SUF                                                                                                                                                                                                                                                                                          | PORT SERVICES LLC                                                                                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)                                                                                                                                                                                                                                                  | 1802 E BUSCH BLVD<br>TAMPA FL 33612 US                                                                                                                                                                                           |
| (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)                                                                                                                                                                                                                                                               | 1912 BRILEY ROAD<br>GREENVILLE NC 27834 US                                                                                                                                                                                       |
| 10/13/2011                                                                                                                                                                                                                                                                                                                                     | L11000117144                                                                                                                                                                                                                     |
| 3. Date of filing/registration in Florida                                                                                                                                                                                                                                                                                                      | 4. Document number                                                                                                                                                                                                               |
| 5. (a) Registered Agent and Registered Office shown on the                                                                                                                                                                                                                                                                                     | he records of the Florida Dept. of State:                                                                                                                                                                                        |
| Registered Agent:                                                                                                                                                                                                                                                                                                                              | JACQUELINE N CASPER                                                                                                                                                                                                              |
| Registered Office Address:                                                                                                                                                                                                                                                                                                                     | 1201 HAYS STREET TALLAHASSEE FL 32301 US                                                                                                                                                                                         |
|                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                                                                                  |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>                                                                                                                                                                                                                                                                                | V Registered Office address:                                                                                                                                                                                                     |
| <u><b>NEW</b></u> Registered Agent:                                                                                                                                                                                                                                                                                                            | Corporation Service Company                                                                                                                                                                                                      |
| <u>NEW</u> Registered Office Address:<br>(MUST BE FLORIDA STREET ADDRESS)                                                                                                                                                                                                                                                                      | 1201 Hays Street                                                                                                                                                                                                                 |
| ,,                                                                                                                                                                                                                                                                                                                                             | Tallahassee ,FL 32301                                                                                                                                                                                                            |
| If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cahereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. | address of the registered office and the business se of a Florida limited liability company, it is                                                                                                                               |
| /s/ Walter B. Harris (Signature of a member or authorized representative of a member)                                                                                                                                                                                                                                                          |                                                                                                                                                                                                                                  |
| (Signature of a member of authorized representative of a member)                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                  |
| WALTER B. HARRIS (Printed or typed name of signee)                                                                                                                                                                                                                                                                                             | •                                                                                                                                                                                                                                |
| I hereby accept the appointment as registered agent and ag<br>comply with the provisions of all statutes relative to the pro<br>am familiar with and accept the obligations of my position of<br>F.S. Or if this document is being fifed to merely reflect a c<br>confirmathat the limited liability company has been notified<br>By:          | ree to act in this capacity. I further agree to per and complete performance of my duties, and I is registered agent as provided for in Chapter 608, hange in the registered office address, I hereby in writing of this change. |
|                                                                                                                                                                                                                                                                                                                                                | Becky Peirce, Asst. Vice President                                                                                                                                                                                               |
| Division of Corporations, P.O. Box (                                                                                                                                                                                                                                                                                                           | 6327, Tallahassee, FL 32314                                                                                                                                                                                                      |

**FILING FEE: \$25.00**