## 113000054045

(	Requestor's Name)				
	Address)				
· ·	nadicas				
(	Address)				
(1	City/State/Zip/Phone #)				
PICK-UP	☐ WAIT ☐ MAIL				
(	Business Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to Filing Officer:					
<u> </u>					

Office Use Only



600257630406

03/24/14--01035--019 \*\*25.00



LLC RAPROChange

'APR 1 0 2014 T. CARTER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: April Mcbride ahudson@cscinfo.com

Date: March 20, 2014

Order#: 047377/010

Re: 800 ON THE TRAX, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:April Mcbride c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## 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: 800 ON THE	TRAX, LLC				
2. (a)	800 SW 21st Terrace		(b) PO Box 30130			
(",	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)			
	Fort Lauderdale FL 33312		Fort Lauderdale	FL	33303	
2	04/12/2013		L13000054045			
3.	Date of filing/registration in Florida	4.	Document n	umber		
5.(a)	LEVINE, MORRIE I		<del></del>	•		
	Registered Agent and Registered Office shown on the records of	of the Florida	Dept. of State:			
	3300 N 29 Ave, Suite 104					
	Registered Office Address (MUST BE FLORIDA STREE					
				4	<b>≓</b> ≥ ≥ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤ ≤	
	Hollywood , F	FL33020		Lough		
(b)	Corporation Service Company					
(0)	Enter name of NEW Registered Agent and/or NEW Registered	ress:	=			
	1201 Hays Street			٥		
	NEW Registered Office Address:		4-7		2>	
	T. 4. 6					
	<u>Tallahassee</u> , F	L 32301				
the cha agent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address will be identical. Or, in the case of a Florida limited are authorized by an affirmative vote of the members cles of organization or the operating agreement of the	of the regist liability con of the limi	ered office and the busi npany, it is hereby conf ted liability company or	ness office c	of the registered te change(s)	
	Allowa Team	1	Barbara Z	19911	1	
Signat	ure of a member or authorized representative of a member	*		d name of sign		
provision the oblition to mere notified	by accept the appointment as registered agent and as cons of all statutes relative to the proper and complet gations of my position as registered agent as provided by reflect a change in the registered office address, and writing of this change.  To fregistered Agent Corporation Service Company	e performa led for in C I hereby co	nce of my duties, and Li hanter 605, F.S., Or, if i	am familiar i this documer	vith and accept it is being filed	

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