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Division of Corporations

## Florida Department of State Division of Corporations

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LLC REGISTERED AGENT CHANGE FLEMING'S INTERNATIONAL, LLC

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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.

L N	ame of the limited liability company: FLEMING'S	INTERNATION	GAL, LLC	· · · · · ·					
2. (a)	2202 N West Shore Blvd., 5th Floor	(b) 2202 N West Shore Blvd., 5th Floor							
<u> </u>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company:  (Nate: MAY RE POST OFFICE BOX)						
	Tampa, FI 33607		Fampa, Fl 33607						
	07/16/2014		14000112523						
3,	Date of filing/registration in Florida	4.	Document number	**** <u></u>					
.3,	Kelly Lefterts	₹.	Document namoer						
	Registered Agent and Registered Office shown on the record 2202 N West Shore Blvd., 5th Floor  Registered Office Address (MUST BE FLORIDA STRE	ept. of State:							
	Tampa	, FL 33607							
(b)	United Agent Group Inc.	2824 JUL 31	,						
	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Register</u>		<del>1</del>						
	801 US Highway 1			NE S					
	NEW Registered Office Address:		PM 2: 2	C					
	North Palm Beach	, FL 33408	. · · · · · · · · · · · · · · · · · · ·						
chang agent was/w	limited liability company is not organized under the e or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited authorized by an affirmative vote of the membericles of organization or the operating agreement of	the registered of d liability comparts of the limited	office and the business office of the registered pany, it is hereby confirmed that the change(s) and liability company or as otherwise provided in						
	Adia Myles ature of a member authorized representative of a member		tyles, Attorney-in-Fact	•					
Sign	ature of a member or authorized representative of a member		Printed or typed name of signee	_					
provis	hy accept the appointment as registered agent and ions of all statutes relative to the proper and compl digations of my position as registered agent as proy ely reflect a change in the registered office address	ete performance	ce of my duties, and I am familiar with and acco	DI					

notified in writing of this change.

Adia Myles
Signature of Registered Agent Adia Myles, Special Secretary