

L15000 110041

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

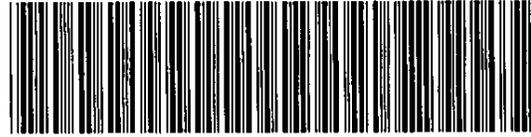
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JUL 06 2015

J SHIVERS

Date: 07/02/2015

Account #: 120000000088

Name: ERIC HOOD

Reference #: B067723

ENTITY NAME: PINE SCENT LLC

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Annual Report
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other: _____

Authorized Amount: ^{\$} 25.00

Signature: Eric Hood

Date: 07/02/2015

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Authorized Amount: \$ 25.00

Signature: Eric Hood

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

Pursuant to the provisions of sections 605.0114, 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: PINE SCENT LLC

2. (a) Principal office address of limited liability company: 5189 EASTGATE LANE
LONG GROVE, IL 60047
(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 5189 EASTGATE LANE
LONG GROVE, IL 60047
(Note: MAY BE POST OFFICE BOX)

6/24/2015
 3. Date of filing/registration in Florida

L15000110041
 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: NATIONAL CORPORATE RESEARCH, LTD.

Registered Office Address: 155 OFFICE PLAZA DRIVE
TALLAHASSEE, FL 32301

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: National Corporate Research, Ltd., Inc.

NEW Registered Office Address: 115 North Calhoun Street, Suite 4

(MUST BE FLORIDA STREET ADDRESS)
Tallahassee, FL 32301

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 operating agreement of the limited liability company.

Signature of a member or authorized representative of a member

Robert T. Napier

Printed or typed name of signer

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 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Signature of Registered Agent

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

FILED
 TALLAHASSEE, FLORIDA
 JUN 24 2015
 8:54 AM