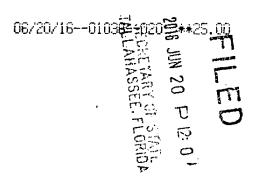
## L160000 65100

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer.				

Office Use Only



800287087508



JUN 21 2013 BRUCL

## 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. N	ame of the limited liability company: MB USED CL	OTHING	3 LLC
()	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	617 NE 3RD STREET SUITE BOYNTON	1	1520 NE 2ND COURT
	BEACH, FL 33435	E	BOYNTON BEACH, FL 33435
		L1	L16000005100
3.	Date of filing/registration in Florida	4.	Document number
5. (a)			
J. (u)	Registered Agent and Registered Office shown on the records of	the Florida De	Dept. of State:
	MARIE Y ALEXIS		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	617 NE 3RD STREET SUITE 6		
	BOYNTON BEACH .FL	33435	
	3		<del></del>
(b)	Enter name of NEW Registered Agent and/or NEW Registered		745 241
	Enter name of NEW Registered Agent and/or NEW Registered	Office addre	ress:
	IMELDA OGE JOSEPH		ZBIG JUN 20 SECRETARY FAULAHASSE
	NEW Registered Office Address:	<del></del>	FT1
	617 NE 3RD STREET SUITE 6		
	BOYNTON BEACH , FI	33435	JR OJ
the ch agent was/w	limited liability company is not organized under the lar ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited livere authorized by an affirmative vote of the members of ticles of organization or the operating agreement of the	f the registe ability com of the limite limited liab	tered office and the business office of the register mpany, it is hereby confirmed that the change(s) ited liability company or as otherwise provided in
Sign	ature of a member or authorized representative of a member	HAILL	Printed or typed name of signee
I here provis the obtone notified	eby accept the appointment as registered agent and agricons of all statutes relative to the proper and complete ligations of my position as registered agent as provide rely reflect a change in the registered office address, I ed in writing of this change.	ree to act in performan d for in Ch hereby conj	in this capacity. I further goree to comply with t