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MAR 0 6 2017 S. YOUNG DEPARTMENT OF STATE

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195
REFERENCE : 524052 7171563
AUTHORIZATION CAMELO BLE MAN
COST LIMIT (:\s\25.00
ORDER DATE : February 24, 2017
_
ORDER NO. : 524052-005
CUSTOMER NO: 7171563
ORDER TIME : 3:21 PM ORDER NO. : 524052-005 CUSTOMER NO: 7171563 CHANGE OF AGENT CHANGE OF AGENT
NAME: ADTHRIVE LLC
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY
CONTACT PERSON: Melissa Zender EXT#
EXAMINER:

6 S

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.

2. (a) 417 5th Avenue, 7th Floor		(h	b) 417 5th Avenue, 7th Floor
(,	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	(0,	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	New York, NY 10016		New York, NY 10016
	04/27/2016	 .	L16000085344
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	HF REGISTERED AGENTS, LLC		
	Registered Agent and Registered Office shown on the records of	the Florida	la Dept. of State:
	1715 MONROE STREET		•
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS.	
			MAR HA
	FORT MYERS FI	22004	50 11
	, FL	. <u>33901</u>	
(b)	Corporation Service Company		
(17)	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ddress: œ
			ddress: œ ç
	1201 Hays Street		***************************************
	NEW Registered Office Address:		
	Tallahassee , FI	32301	<u>1</u>
the cha agent v was/wa	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the	the regise ability confithe limited li	istered office and the business office of the registere company, it is hereby confirmed that the change(s) mited liability company or as otherwise provided in liability company.
Signa	ture of a member or authorized representative of a member	Siev	Printed or typed name of signee
I here provisi the obi	by 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 ely reflect a change in the registered office yellacoh fin writing of this change. Asst. Vice Pres	performa d for in C leneby co	et in this congoity. I further garag to comply with the
///	11/1/12		
	by of Registered Agent Corporation Service Company	D17	

FILING FEE: \$25.00