

M 000000000085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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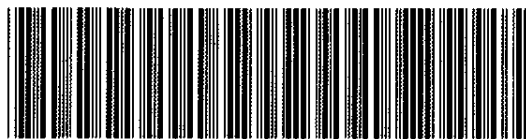
(Business Entity Name)

(Document Number)

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11 MAR 11 AM 10:44

DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

11 MAR 11 PM 1:26

B. KOHR

MAR 11 2011

EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 696557 7739037

AUTHORIZATION :

*Spuddelema*

COST LIMIT : \$ 25.00

ORDER DATE : March 11, 2011

ORDER TIME : 10:20 AM

ORDER NO. : 696557-061

CUSTOMER NO: 7739037

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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CHANGE OF AGENT

NAME: INGENIOUS DESIGNS LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_\_\_\_ CERTIFIED COPY  
XX PLAIN STAMPED COPY

CONTACT PERSON: Carina L. Dunlap

EXAMINER'S INITIALS: \_\_\_\_\_

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

*Pursuant to the provisions of sections 608.416 or 608.508, 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: INGENIOUS DESIGNS LLC

2. (a) Principal office address of limited liability company: 80 Rodeo Dr.  
Edgewood, NY 11717  
*(Note: MUST BE STREET ADDRESS)*

(b) Mailing address of limited liability company: 1 HSN Drive  
St. Petersburg, FL 33729  
*(Note: MAY BE POST OFFICE BOX)*

01/13/2000  
3. Date of filing/registration in Florida

M00000000085  
4. Document number

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

Registered Agent: NRAI Services, Inc.

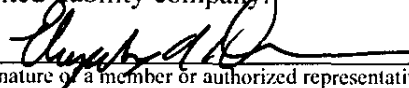
Registered Office Address: 515 E. Park Avenue  
Tallahassee, FL 32301

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

NEW Registered Agent: Corporation Service Company


NEW Registered Office Address: 1201 Hays Street  
Tallahassee, FL 32301  
*(MUST BE FLORIDA STREET ADDRESS)*

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)

Elizabeth A. Dawson, Authorized Person  
(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 608, 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.*

By:   
(Signature of Registered Agent)

Grace E. Kirby, Asst. Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

FILED STATE  
SECTION OF CORPORATION  
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#061