

170000000211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ MAIL

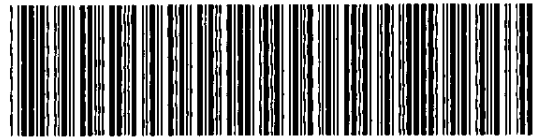
(Business Entity Name)

(Document Number)

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WASHINGTON, DISTRICT OF COLUMBIA  
FLORIDA

MAR 18 2013

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**CSC**

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 563264 7925152

AUTHORIZATION : *Delema*

COST LIMIT : \$ 25.00

ORDER DATE : March 8, 2013

ORDER TIME : 3:22 PM

ORDER NO. : 563264-003

CUSTOMER NO: 7925152

CHANGE OF AGENT

NAME: MUSIC CITY FIRE SPRINKLER, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

           CERTIFIED COPY  
XX            PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

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

2013 MAR 15 21:03:02  
STATE OF FLORIDA  
DEPARTMENT OF REVENUE

FILED

**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: MUSIC CITY FIRE SPRINKLER, LLC

2. (a) Principal office address of limited liability company: 238 Molly Walton Drive  
(Note: **MUST BE STREET ADDRESS**) Hendersonville TN 37075

(b) Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

01/27/2000

3. Date of filing/registration in Florida

M00000000211

4. Document number

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

Registered Agent:

CT Corporation System

Registered Office Address:

1200 South Pine Island Road  
Plantation, FL 33324

(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

(**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]  
Signature of a member or authorized representative of a member

Dona Priebe, Authorized Person

Printed or typed name of signee

*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]

Signature of Registered Agent Corporation Service Company Grace E. Kirby, Assistant V.P.

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

FILING FEE: \$25.00