## M03000000172

| (Re                                     | equestor's Name)  |             |
|---|-------------------|-------------|
| (Address)                               |                   |             |
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| (Cit                                    | ty/State/Zip/Phon | .e #)       |
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| (Bu                                     | siness Entity Na  | me)         |
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**EXAMINER** 



CORPORATION SERVICE COMPANY.

ACCOUNT NO. : 072100000032

REFERENCE: 787875

7606627

AUTHORIZATION :

COST LIMIT :

ORDER DATE: November 11, 2008

ORDER TIME : 11:47 AM

ORDER NO. : 787875-006

CUSTOMER NO: 7606627

CHANGE OF AGENT

NAME: THEODORE BOCA RATON LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman

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:   | THEODORE BOCA RATON LLC  |
|---|--|
| 2. (a) Principal office address of limited li (Note: MUST BE STREET ADD)  | ability company: 128 Theodore Place  RESS Tornhill, Ontario ON 141 8-E3 CA   |
| (b) Mailing address of limited liability of (Note: MAY BE POST OFFICE)  | Attn: Corporate Paralegal Dept. Chicago, IL 60606  |
| 01/16/2003  | M0300000172  |
| 3. Date of filing/registration in Florida   | 4. Document number   |
| 5. (a) Registered Agent and Registered O  | ffice shown on the records of the Florida Dept. of State:  |
| Registered Agent:   | NRAI Services, Inc.  |
| Registered Office Address:  | M0300000172  4. Document number  Thice shown on the records of the Florida Dept. of State:  NRAI Services, Inc.  2731Executive Park Drive Suite 4 Weston, FL 33331   |
| (b) Enter name of NEW Registered Ag   | ent and/or NEW Registered Office address:  |
| NEW Registered Agent:   | Corporation Service Company  |
| NEW Registered Office Address:  | 1201 Hays Street   |
| (MUST BE FLORIDA STREET A   | Tallahassee ,FL 32301  |
| that after the change or changes are made, to office of the registered agent will be identic hereby confirmed that the change(s) was/we   | ized under the laws of the State of Florida, it is hereby confirmed the Florida street address of the registered office and the business al. Or, in the case of a Florida limited liability company, it is the authorized by an affirmative vote of the members of the limited in the articles of organization or the operating agreement of the |
| •   | ileniuei j   |
| (Printed or typed name of signee)   |  |
| I hereby accept the appointment as register comply with the provisions of all statutes ream familiar with and accept the obligations F.S. Or, if this document is being filed to me confirm that the limited liability company hereby:  (Signature of Registered Agent)  Amy Guides | red agent and agree to act in this capacity. I further agree to lative to the proper and complete performance of my duties, and I of my position as registered agent as provided for in Chapter 608, erely reflect a change in the registered office address, I hereby as been notified in writing of this change.                               |

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

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c.j