## 13000001319

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

Office Use Only

B. KOHR

AUG 1 1 2011

EXAMINER



800210262188



ACCOUNT NO. : 12000000195

REFERENCE: 857580

AUTHORIZATION

COST LIMIT

ORDER DATE: July 26, 2011

ORDER TIME : 2:24 PM

ORDER NO. : 857580-025

CUSTOMER NO: 7830453

## CHANGE OF AGENT

NAME:

AMERICAN MANAGEMENT SERVICES

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

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 in the State of Florida. 1. Name of the limited liability company: AMERICAN MANAGEMENT SERVICES LLC 2. (a) Principal office address of limited liability company: 2801 Alaskan Way, Suite 200 (Note: MUST BE STREET ADDRESS) Seattle, WA 98121 2801 Alaskan Way, Suite 200 (b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX) Seattle, WA 98121 04/28/2003 M03000001319 3. Date of filing/registration in Florida 4. Document number 5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State: NRAI Services, Inc. Registered Agent: 515 E. Park Avenue Registered Office Address: Tallahassee, FL 32301 (b) Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company **NEW** Registered Agent: 1201 Hays Street **NEW** Registered Office Address: (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. Mauren attel (Signature of a member or authorized representative of a member) Maureen Cathell, 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. (Signature of Registered Agent) Corporation Service Company Grace E. Kirby, Asst. VP

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

INHS18 (05/08)