## MU4000003046

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B. KOHR
AUG 1 1 2010
EXAMINER



RPORATION SERVICE COMPANY ACCOUNT NO. : I2000000195

REFERENCE : 472720

7788532

AUTHORIZATION

COST LIMIT :

ORDER DATE : August 9, 2010

ORDER TIME : 10:49 AM

ORDER NO. : 472720-028

CUSTOMER NO: 7788532

## CHANGE OF AGENT

NAME: MCKIBBON MANAGEMENT, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

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:	MCKIBBON	MANAGEMENT, LLC	· 5
2. (a) Principal office address of limited l (Note: MUST BE STREET ADD	iability company: <u>RESS</u> )	402 Washington Street E. Gainesville, GA 30501	1000 C
(b) Mailing address of limited liability (Note: MAY BE POST OFFICE)	company: BOX)	3	ON THE OWN
07/29/2004		M0400003046	_
3. Date of filing/registration in Florida	4	Document number	
5. (a) Registered Agent and Registered C	Office shown on th	ne records of the Florida Dept. of State:	
Registered Agent:		CT Corporation System	_
Registered Office Address:		1200 South Pine Island Rd. Plantation, FL 33324	<del>_</del>
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent:		Corporation Service Company	
NEW Registered Agent:		Corporation Service Company	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		1201 Hays Street	
		Tallahassee ,FL 32301	_
If the limited liability company is not orgathat after the change or changes are made, office of the registered agent will be identified by confirmed that the change(s) was/v liability company or as otherwise provided limited liability company.  Blue January  (Signature of a member or authorized representative of a	the Florida street ical. Or, in the cal vere authorized by I in the articles of	nws of the State of Florida, it is hereby confi- address of the registered office and the busi- se of a Florida limited liability company, it is an affirmative vote of the members of the corganization or the operating agreement of	rmed ness is limited the
Blanca Lozada, Authorized Person (Printed or typed name of signee)		-	
I hereby accept the appointment as registed comply with the provisions of all statutes of am familiar with and accept the obligation F.S. Or, if this document is being filed to confirm that the limited liability company Corporation Service Company By:  (Signature of Redistered Again) Sylvia Queppe		gree to act in this capacity. I further agree to per and complete performance of my duties, as registered agent as provided for in Chapt hange in the registered office address, I here in writing of this change.	o and I er 608, eby

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