M0400000 4003

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

Office Use Only



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06/25/14--01028--005 **25.00

JIVISION OF CERPORATION

C. LEWIS
JUL 11 2014
EXAMMER



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Chelsey Martine cmartin0@cscinfo.com

Date: June 23, 2014

Order#: 183938-003

Re: TRAVELERS MARKETING LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX ___ File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Chelsey Martine c/o Corporation Service Company

2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.	Na	me of the limited liability company: TRAVELERS	MARI	KETING	LLC	· · · · · · · · · · · · · · · · · · ·	
2.	(a)			(b)			
	\- <i>\</i>	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(-/-	N	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
		47 CHURCH STREET SUITE 301		_			
		WELLESLEY, MA 02482		_			
		09/21/2004			M0400000	04003	
3.		Date of filing/registration in Florida	4			Document number	
5.	(a)	Registered Agent and Registered Office shown on the records of the Florid C T CORPORATION SYSTEM Registered Office Address (MUST BE FLORIDA STREET ADDRESS 1200 SOUTH PINE ISLAND ROAD		lorida De	· 		
		PLANTATION , FI	L <u>3</u>	3324		W25	
		Enter name of NEW Registered Agent and/or NEW Registered 1201 Hays Street NEW Registered Office Address:			_	. 33 TO 15 T	
		Tallahassee , FI					
the age wa	cha ent v s/we	imited liability company is not organized under the launge or changes are made, the Florida street address o will be identical. Or, in the case of a Florida limited liere authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ws of the iabili	f the St register ty comp e limiter ted liab	ate of Flo red office pany, it is ed liability pility com	and the business office of the registered shereby confirmed that the change(s) company or as otherwise provided in spany.	
	Signat	use of member authorized representative of a member		DONA	PRIEBE,	Printed or typed name of signee	
I h pro the to not	nerel ovisi obli mere tified	by accept the appointment as registered agent and agents on sof all statutes relative to the proper and complete igations of my position as registered agent as provide the reflect a change in the registered office address, I thin writing of this change. The of Registered Agent Corporation Service Company	e perj ed foi here	formane r in Che by conf	ce of my a apter 605, firm that i	ucity I further agree to comply with the	