

## Florida Department of State Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180001689003)))



H180001683003ABC0

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC

Account Number : 110432003053

Phone : (561)594-8107

Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:

## LLC REGISTERED AGENT CHANGE CBIZ NETWORK SOLUTIONS, LLC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 02      |
| Estimated Charge      | \$25.00 |

J. LEGGETT



## H18000168900

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

| 1. The name of the limited liability company is: CBIZ  | Network Solutions, LLC   |                                     |  |              |
|--|--|-------------------------------------|--|--------------|
| 2. (a) Principal office address of the limited liability comapny:  | 6050 OAK TREE BLVD., SUITE 50  | 0                                   |  | _            |
| (Note: MUST BE STREET ADDRESS)   | CLEVELAND OH 44131  6050 OAK TREE BLVD., SUITE 500   |                                     | _  |              |
| (b) Mailing address of limited liability company:  |  |                                     |  |              |
| (Note: MAY BE POST OFFICE BOX)   | CLEVELAND OH 44131   |                                     |  | _<br>_<br>   |
| <u>2/23/2005</u>   | M05000000957   |                                     |  |              |
| <ul><li>3. Date of filing/registration in Florida</li><li>5.(a) Registered Agent and Registered Office shown of</li></ul>  | Document number on the records of the Florida Dept. or   | f State:                            |  | =            |
| Registered Agent:  | CT CORPORATION SYSTEM  | <u>4</u>                            | <u></u>  | _            |
| Registered Office Address:   | 1200 SOUTH PINE ISLAND ROAD  |                                     | - <del>12</del><br>- <del>12</del><br>- <del>12</del>              | -            |
|  | PLANTATION FL 33324  |                                     | Ġ.   | <br>-•       |
| (b) Enter name of NEW Registered Agent and/or NEW R  | epistered Office address:  | (,)                                 | 100<br>100<br>100<br>100<br>100<br>100<br>100<br>100<br>100<br>100 | 7            |
| NEW Registered Agent:  | Corporate Creations Network Inc.   |                                     | P.T.   | ٠.           |
| NEW Registered Office Address:   | 11380 Prosperity Farms Road #221E  | -::··                               | 5.1  | _            |
| (MUST BE FLORIDA STREET ADDRESS)   |  | .53                                 | ~.—  | -            |
|  | Pajm Beach Gardens FL 3341   | 0                                   |  | -            |
| If the limited liability company is not organized under the laws or changes are made, the Florida street address of the registered identical. Or, in the case of a Florida limited liability company, an affirmative vote of the members of the limited liability company the operating agreement of the limited liability company.  (Separative of a member or audiorized representative of a member)  Joseph Panholzer, Attorney-in-Fact (Printed or Typed name of signee) | office and the business office of the register it is hereby confirmed that the change(s) wany or as otherwise provided in the articles | red agent<br>as/were a<br>of organi | will be<br>suthorized<br>ization or                                | l by         |
| I hereby accept the appointment as registered agent and agree to fall statutes relative to the proper and complete performance on position as registered agent as provided for in Chapter 605, in the existence office address, I hereby confirm that the limited  | of my duties, and I am familiar with and acc<br>F.S. Or, if this document is being filed to n  | cept the o<br>nerely ref            | bligation.<br>Ject a cha   | s of<br>inge |
| Division of Corporations, P.O. B   | ox 6327, Tallahassee, FL 32314   |                                     |  |              |
| INHS18(10/99) Corroyate Creations International Inc.   |  |                                     |  |              |
| Corporate Creations International Inc.<br>11380 Prosperity Farms Road #221E  |  |                                     |  |              |
| Palm Beach Gardens FL 33410  |  |                                     |  |              |