## M05000002364

(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)				
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)				
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3 APR 26 AM II: 1

C. LEWIS

MAY 8 - 2013

EXAMINER



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: April 24, 2013

Order#: 612090-004

Re: THE ESTOPINAL GROUP LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Vera M. Norris 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 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.	Naı	ne of the limited liability company: THE ESTOPINAL	_ GROUP LLC		
2.	(a)	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS)	903 Spring Street Jeffersonville, IN 47130	<u> </u>	
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		R 26 M	
05/04/2005			M05000002364	LORIO ORIO	
3.	Dat	e of filing/registration in Florida	4. Document number	٠	
5.	(a)	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:			
		Registered Agent:	C T Corporation System		
		Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324  IEW Registered Office address:  Corporation Service Company  1201 Hays Street		
	(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :			
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)			
		MOST DE LEGISLATISTREET ADDRESS	Tallahassee	,FL 32301	
co an lia the	nfirr d the bilit e me	imited liability company is not organized under the land that after the change or changes are made, the Flee business office of the registered agent will be identify company, it is hereby confirmed that the change(s) mbers of the limited liability company or as otherwise trating agreement of the limited liability company.	orida street address of the cal. Or, in the case of a F was/were authorized by a	registered office Torida limited In affirmative vote of	
		Priebe, Vice President or typed name of signee	-		
		by accept the appointment as registered agent and as with the provisions of all statutes relative to the pro- im familiar with and accept the obligations of my pos or 608, F.S. Or, if this document is being filed to mer s, I hereby confirm that the limited liability company	gree to act in this capacity per and complete perforn ition as registered agent ely reflect a change in th has been notified in writ	v. I further agree to nance of my duties, as provided for in e registered office ing of this change.	
Big		e of Registered Agent Corporation Service Company	Sylvia Quennet, Asst. VF	)	

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