M 05000002529

_ Xr
(Requestor's Name) 👍
*
(Address)
(1000)
i di
(Address)
(Address)
i i
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
,
C.
Certified Copies Certificates of Status
Certified Copies Certificates of Status
·
Special Instructions to Filing Officer:
•

Office Use Only

B. KOHR

JUL - 1 2011

EXAMINER



500208851125

RECEIVED

11 JUN 30 PH 4: 13

SECRETARY OF STATE ORVISION OF CORPORATIONS
11 JUN 30 AM 8: 23



ACCOUNT NO. : 12000000195

REFERENCE : 832476 7780752

AUTHORIZATION _	111	X		
AUTHORIZATION	MI	rela	El	man

COST LIMIT (\$ 25.00

ORDER DATE: June 30, 2011 ORDER TIME : 3:02 PM ORDER NO. : 832476-025 CUSTOMER NO: 7780752

CHANGE OF AGENT

NAME: ANT OF FLORIDA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX _ _ PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

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: ANT OF FL	ORIDA, LLC			
2. (a) Principal office address of limited liability company (<i>Note: MUST BE STREET ADDRESS</i>)	7: 6831 F. 32nd Street, Suite 300 Indianapolis, IN 46226			
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	_6831 F_32nd Street_Suite 300 _Indianapolis, IN 46226			
05/05/2005	M05000002529			
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:			
Registered Agent:	CT Corporation System			
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324			
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	W Registered Office address:			
<u>NEW</u> Registered Agent:	Corporation Service Company			
<u>NEW</u> Registered Office Address: (AIUST BE FLORIDA STREET ADDRESS)	TallahasseeFL_32301			
If the limited liability company is not organized under the that after the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the chereby confirmed that the change(s) was/were authorized biability company or as otherwise provided in the articles of limited liability company. (Signature of a member or authorized representative of a member)	t address of the registered office and the business asc of a Florida limited liability company, it is by an affirmative vote of the members of the limited			
Jan Laughlin	<u></u>			
(Printed or typed name of lignee) I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the proam familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified Corporation Service formpany. Troy Todd Signature of Register Agent) Registrate of Register Agent	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.			

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25,00