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## M06000001152

(Re	questor's Name)				
(Ad	dress)				
(Ad	dress)				
(Cit	y/State/Zip/Phon	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
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**EXAMINER** 



UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

HOLD FOR PICKUP BY **UCC SERVICES** OFFICE USE ONLY

BINDGRADEREN	October 3, 2008					
SERVICES	CORPORATION NAME (S) AND DOCUMENT NUMBER (S):					
The state of the s	Calence, LLC					
Filing Evidence  ☑ Plain/Confirmati		7	Type of Docume  Certificate of Star			
☐ Certified Copy			□ Certificate of God	od Standing 4		
			☐ Articles Only	A PORTON		
<u>Retrieval Requ</u>	004		☐ All Charter Docu Articles & Amen			
□ Photocopy	<u>est</u>		□ Fictitious Name (			
□ Certified Copy			□ Other			
NEW FILINGS	] [		AMENDMENTS			
Profit	] [		Amendment			
Non Profit			Resignation of RA Officer/Director			
Limited Liability		X	Change of Registered Agent			
Domestication			Dissolution/Withdrawal			
Other			Merger			
				,		
OTHER FILINGS			REGISTRATION/QUALIFICATION			
Annual Reports			Foreign			
Fictitious Name		X	Limited Liability			
Name Reservation	_		Reinstatement			
Reinstatement	]		Trademark			
			Other			

## 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. The name of the limited liability company is: Calence, L	LC	
2. The mailing address of the limited liability company is :		
1560 West Fountainhead Parkway, 2nd Floor Tempe, Arlzona 8	5282	·
02/24/2006	M06000001152	000
3. Date of filing/registration in Florida	4. Document number	
5. The name of the registered agent and the registered office Florida Department of State:	e address as shown on the re	cords of the
CT Corporation System	····	ن کردر ا
Name		0,5%
1200 South Pine Island Road Address		15.00 m
Plantation, FL 33324		
City, State and Z	Zip	V.
6. The name and address of the new registered agent and/or	office:	
No.		
NRAI Services, Inc. Name		
2731 Executive Park Drive, Suite 4		
Florida street address (P.O. Box	NOT acceptable)	
EL 0000		
Weston FL 3333 City, State and Zi		-
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company  (Signature of a member or authorized representative of a member)	aws of the State of Florida, is orida street address of the residal. Or, in the case of a Flowas/were authorized by an twise provided in the articles	egistered office rida limited affirmative vote
Mark N. Rogers  (Printed or typed name of signce)  I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the product of am familiar with and accept the obligations of my pochapter 608. F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company NRAI Services. Inc.	- gree to act in this capacity, sition as registered agent as rely reflect a change in the r v has been notified in writing	I further agree to nice of my duties, provided for in egistered office g of this change.

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

INHS18 (8/05)