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SECRETARY OF STATE

J. SAULSBERRY EXAMINER JUL 19 2012



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 12000000195

REFERENCE : 275453 7891890

AUTHORIZATION :

COST LIMIT :

ORDER DATE : July 13, 2012

ORDER TIME : 9:26 AM

ORDER NO. : 275453-006

CUSTOMER NO: 7891890

CHANGE OF AGENT

NAME:

DEDICATED MANAGEMENT GROUP,

LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

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: DEDICATED MANAGEMENT GROUP, LLC		
2. (a) Principal office address of limited liability compan (Note: MUST BE STREET ADDRESS)	y: 3651 Mars Hill Road Suite 400A	
	Watkinsville, GA 30677	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		
10/31/2007	M07000006497	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on		
Registered Agent:	CT Corporation System	
Registered Office Address:	CT Corporation System 1200 South Pine Island Road Plantation, FL 33324 Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office address:	
NEW Registered Agent:		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member)		
Maureen Cathell, Authorized Person (Printed or typed name of signee)	_	
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pram 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	igree to act in this capacity. I further agree to oper and complete performance of my duties, and I is registered agent as provided for in Chapter 608, change in the registered office address, I hereby d in writing of this change:	
By: (Signature of Registered Agent) Corporation Service Company	Sylvia Queppet, Assistant Vice President	
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314		

FILING FEE: \$25.00