M08000001087

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800252241168

10/21/13--01026--002 **35.00

HOW TAKE OF STATE



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: October 18, 2013

Order#: 845243-005

Re: GAMING LABORATORIES INTERNATIONAL, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

X Check in the amount of \$35.00.

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



October 22, 2013

ATTN: VERA M. NORRIS C/O CORPORATION SERVICE COMPANY 2711 CENTERVILLE ROAD, SUITE 400 WILMINGTON, DE 19808

SUBJECT: GAMING LABORATORIES INTERNATIONAL, LLC

Ref. Number: M08000001087

We have received your document for GAMING LABORATORIES INTERNATIONAL, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 913A00024618

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.

<i>y</i>			
1. Name of the limited liability company: GAMING LABO	PRATORIES INTERNATIONAL,	LLC	
2. (a) Principal office address of limited liability compar (<i>Note: MUST BE STREET ADDRESS</i>)	y: 600 Airport Road Lakewood, NJ 08701	20 20 NO	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	600 Airport Road Lakewood, NJ 08701	V - 100	
03/05/2008 3. Date of filing/registration in Florida	M08000001087 4. Document number	IZ: 02	
 (a) Registered Agent and Registered Office shown on Registered Agent: 	Romanik, David S		
Registered Office Address:	215 South Monroe Street, 2nd Floor Tallahassee, FL 32301		
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addre	<u>ss</u> :	
NEW Registered Agent:	Corporation Service Company		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street		
	Tallahassee	,FL_32301	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the Fand the business office of the registered agent will be iden liability company, it is hereby confirmed that the change(she members of the limited liability company or as otherwishe operating agreement of the limited liability company.	Florida street address of the re tical. Or, in the case of a Flo	egistered office rida limited	
Signature of a member or authorized representative of a member			
Dona Priebe, Authorized Person Printed or typed name of signee	_		
I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the pr and I am familiar with and accept the obligations of my pe Chapter 608, F.S. Or, if this document is being filed to ma address, I hereby confirm that the limited liability compar	agree to act in this capacity. Oper and complete performa osition as registered agent as erely reflect a change in the r y has been notified in writing	I further agree to nce of my duties, provided for in egistered office g of this change.	
By: Signature of Registered Agent Corporation Service Company	Sylvia Queppet, Assistant V	Vice President	
F			

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