. MD800001218

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ry/State/Zip/Phon	e #)
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SECRETARY 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: May 13, 2013

Order#: 646066-081

Re: SIG AGENCY, 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 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.

OUCA.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. Name of the limited lia	bility company: SIG AGENCY	r, LLC	.	
	dress of limited liability compa	2: 1200 City View Center Oviedo, FL 32765		
(1.000.1.2001.2001	<u>, , , , , , , , , , , , , , , , , , , </u>		ರ∞ 🕿	
	limited liability company:	1200 City View Center	ECRIP	
(Note: MAY BE	POST OFFICE BOX)	Oviedo, FL 32765		
			<u>~~~~~~</u> ∫	
03/13/2008		M08000001218	E OF	
3. Date of filing/registration in Florida		Document number	97 5	
()	 and Registered Office shown o	on the records of the Florida De	SH S	
Registered Agent:		David N. Martinez		
Registered Office	Address:	1200 City View Center Oviedo, FL 32765		
		Oviedo, FL 32763		
		EW Registered Office address	_	
<u>NEW</u> Registered A	Agent:	Corporation Service Compan	У	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		1201 Hays Street		
		Tallahassee	,FL 32301	
confirmed that after the ch and the business office of liability company, it is her the members of the limited the operating agreement of	ange or changes are made, the the registered agent will be ideeby confirmed that the change I liability company or as other the limited liability company	ne laws of the State of Florida, in Florida street address of the resentical. Or, in the case of a Flocks) was/were authorized by an awise provided in the articles of	gistered office	
Signature of a member or authorize	ed representative of a member			
Dona Priebe, Authorized Pe Printed or typed name of signee				
	ntment as registered agent ans of all statutes relative to the daccept the obligations of my his document is being filed to that the limited liability comp	d agree to act in this capacity, proper and complete performa position as registered agent as merely reflect a change in the r any has been notified in writing	I further agree to nce of my duties, provided for in egistered office g of this change.	
Signature of Registered Agent			r	
GIRMATUIC OF NEGISTERED AREIN	Cornoration Sarvice Company	Grace F Kirby Assistant V	uce President	

Corporation Service Company Grace E. Kirby, Assistant Vice Preside