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DATE: 1/4/17

NAME: VIONIC GROUP LLC

TYPE OF FILING: CHANGE OF AGENT

COST: 25.00

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STATE
TALLAHASSEE, FL 32302

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

A Hodge

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vionic Group LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Virginia Lopez

Name of Person

Vionic Group LLC

Firm/Company

4040 Civic Center Drive, Suite 430

Address

San Rafael, CA 94903

City/State and Zip Code

vlopez@vionicgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Virginia Lopez

Name of Person

888

at ()

882-7954

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: Vionic Group LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)
4040 Civic Center Drive, Suite 430
San Rafael, CA 94903

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

3. September 8, 2008 4. M0800004110
 Date of filing/registration in Florida Document number

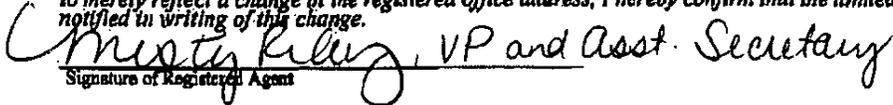
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
C T Corporation System
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
1200 South Pine Island Road
Plantation, FL 33324

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
Telos Legal Corp.
NEW Registered Office Address:
155 Office Plaza Drive
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.

 C. Bruce Campbell
 Signature of a member or authorized representative of a member Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

 VP and Asst. Secretary
 Signature of Registered Agent

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

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