

W08000005379

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000202984 3)))



H090002029843A8C1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

FILED
2009 SEP 17 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
09 SEP 17 PM 2:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE**CANARY ACQUISITIONS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	012
Estimated Charge	\$35.00

\$35.00

Electronic Filing Menu

Corporate Filing Menu

M. THOMAS

SEP 18 2009

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: CANARY ACQUISITIONS, LLC

2. (a) Principal office address of limited liability company: _____



(Note: **MUST BE STREET ADDRESS**)

2 DAMONMILL SQ STE 1A

(b) Mailing address of limited liability company: _____



(Note: **MAY BE POST OFFICE BOX**)

9 DAMONMILL SQ STE 1A

Concord, MA 01742

12/11/2008

3. Date of filing/registration in Florida

M08000005379

4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of _____

Registered Agent: Blumergexcelsior Corporate Services, Inc.

Registered Office Address: _____

515 B PARK AVE

TALLAHASSEE FL 32301 US

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent:

C T Corporation System

NEW Registered Office Address:

1200 South Pine Island Road

(MUST BE FLORIDA STREET ADDRESS)

Plantation, FL 33324

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

David H. Hopfenberg

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 608, 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.

By:

C T Corporation System

Signature of Registered Agent

TRACI HOUCK

SPECIAL ASSISTANT SECRETARY

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

IN1518 (05/08)