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Division of Corporations

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Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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LLC REGISTERED AGENT CHANGE TELLING INDUSTRIES, LLC

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Help

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.

I. Na	me of the limited liability company: Telling Industries	LLC			
2. (a)			(b)	Mailing address of limited liability company:	
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAYRE POST OFFICE BOX)	
	4420 Sherwin Rd		4420 Sher	win Rd	
	Willoughby, OH 44094		Willoughby, OH 44094		
	12/30/2008		M08000005	5584	
3.	Date of filing/registration in Florida	- 4.		Document number	
5. (a)	Registered Agent and Registered Office shown on the records of	the Flori	da Dept. of Stat	e;	
	CORPORATION SERVICE COMPANY		•		
	Registered Office Address (MUST BE FLORIDA STREET)	_			
	1201 HAYS STREET				
	TALLAHASSEE , FL	32301		18. FEB 22	
(b)	C T Corporation System	22			
(0)	Enter name of NEW Registered Agent and/or NEW Registered	- 14. TR			
				PR 5: 29	
	NEW Registered Office Address:	- <u> </u>			
	1200 South Pine Island Road				
	Plantation	11121		-	
	Plantation FL	·		_	
he cha igent v was/wo	imited liability company is not organized under the layinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members of cless of organization or the operating agreement of the	f the reg ability of of the li	gistered offic company, it i mited habilit	e and the business office of the registered is hereby confirmed that the change(s) ty company or as otherwise provided in	
Ist to	n Small	Jos	n Small, Mana	nging Member	
Signa	ture of a member or authorized representative of a member			Printed or typed name of signee	
топуте	by accept the appointment as registered agent and agions of all statutes relative to the proper and complete igations of my position as registered agent as provide ely reflect a change in the registered office address, I in writing of this change. C T Corporation System	ree to a perfor ed for it hereby	ct in this cap mance of my n Chapter 60 confirm that	pacity. I further agree to comply with the duties, and I am familiar with and accept 5, F.S. Or, if this document is being filed the limited liability company has been	
3y: /s/	Agnes Jensen, Agnes Jensen, Asst Secretary				

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