

M09 VVVVVV 440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

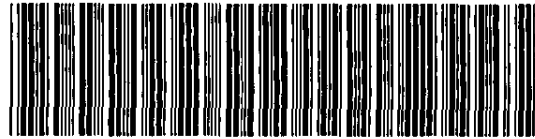
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OCT 18 2011

EXAMINER



500213093855

RECEIVED
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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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11 OCT 17 AM 8:53
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CSC

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 916017 7266821

AUTHORIZATION :

COST LIMIT : \$ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT 17 AM 8:53

ORDER DATE : September 19, 2011

ORDER TIME : 2:28 PM

ORDER NO. : 916017-015

CUSTOMER NO: 7266821

CHANGE OF AGENT

NAME: SCHOENSTADT POP LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS: _____

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: SCHOENSTADT POP, LLC
2. (a) Principal office address of limited liability company: 2711 Centerville Rd, Suite 400
(Note: MUST BE STREET ADDRESS) Wilmington, DE 19808

- (b) Mailing address of limited liability company: 2711 Centerville Rd, Suite 400
(Note: MAY BE POST OFFICE BOX) Wilmington, DE 19808

- 02/02/2009 M09000000440
3. Date of filing/registration in Florida 4. Document number

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

Registered Agent: Julia P Schoenstadt

Registered Office Address: 1708 Gulf Beach Blvd.
Tarpon Springs FL 34689

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

NEW Registered Agent: Corporation Service Company

NEW Registered Office Address: 1201 Hays Street

(MUST BE FLORIDA STREET ADDRESS) 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.

Julia Schoenstadt
(Signature of a member or authorized representative of a member)

JULIA SCHOENSTADT
(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: Sylvia Queppet
(Signature of Registered Agent) Corporation Service Company Sylvia Queppet, Asst. Vice President

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

FILING FEE: \$25.00

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