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(Address)							
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PICK-UP	☐ WAIT	MAIL					
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(Document Number)							
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K.SALY EXAMINER DEC 28 2015



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscqlobal.com

Date: December 21, 2015

Order#: 900269-003

Re: COLEMAN FLOOR, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX ___ Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Janis M. Smith

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.

QUCA.XCOA

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.	Na	me of the limited liability	company: COLEMAN FLOO	OR, LLC		
2.	(a)	8020 ARCO CORPORAT	E DRIVE of limited liability company:	_ (b)		x 90068 Mailing address of limited liability company:
			STREET ADDRESS)		•	(Note: MAY BE POST OFFICE BOX)
		Suite 400	. <u> </u>	_	 .	
		RALEIGH,	NC 27617	_	Raleigh,	NC 27675
		05/01/2009		_	М090000	01676
3.		Date of filing/reg	istration in Florida	4.		Document number
5.	(a)	C T CORPORATION S	YSTEM			
	` ,	Registered Agent and Registered	d Office shown on the records of th	ne Florida	Dept. of State	- e:
		1200 SOUTH PINE ISLA	AND ROAD			
Registered Office Address (MUST BE FLORIDA STREET ADDRESS)						- - 2
		DI ANTATION				ZOIS DEC
		PLANTATION	, FL_	33324		- 52 73
	(b)	Corporation Service Com	nany			\$ - M
	(0)		l Agent and/or NEW Registered (Office add	ress:	
						PM 3: 02
		1201 Hays Street				\$ \frac{1}{2} \fra
		NEW Registered Office Address	ss:			
						-
		Tallahassee	, FL_	32301		_
the ago wa	e cha ent w s/we	nge or changes are made, to will be identical. Or, in the core authorized by an affirm	he Florida street address of t case of a Florida limited lial	he regist bility cor the limi imited li	ered office npany, it is ted liability ability con	orida, it is hereby confirmed that after e and the business office of the registered is hereby confirmed that the change(s) y company or as otherwise provided in inpany. uthorized Person
5	Signat	ure of exember or authorized re	presentative of a member			Printed or typed name of signee
pro the to no	ovisie obli mere tified	by accept the appointment of the solution of all statutes relative in the solution as it is reflect a change in the relative of this change. The of Registered Agent Corporate of the solution of the solutio	to the proper and complete pregistered agent as provided egistered office address. I he	performa for in C. ereby col	nce of mŷ d hapter 605 nfirm that	acity. 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 rby, Assistant Vice President
		_	n of Componetions P.O. P.			•