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K.SALY EXAMINER JAN -8 2013



CORPORATION SERVICE COMPANY. ACCOUNT NO. : 12000000195

REFERENCE: 482866 7682787

AUTHORIZATION :

COST LIMIT :

ORDER DATE: January 2, 2013

ORDER TIME : 10:11 AM

ORDER NO. : 482866-047

CUSTOMER NO: 7682787

CHANGE OF AGENT

NAME: MADDOX INVESTMENTS, L.L.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

___ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

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.

Name of the limited liability company: MAD	DOX INVESTMENTS OF MISSOURI, L.L.C.
2. (a) Principal office address of limited liability (Note: MUST BE STREET ADDRESS)	company: 111 North Main Clarkton, MO 63837
(b) Mailing address of limited liability compar (Note: MAY BE POST OFFICE BOX)	P.O. Box 68 Clarkton, MO 63837
06/18/2009	M09000002352
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office sh	nown on the records of the Florida Dept. of State:
Registered Agent:	C T Corporation System
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent: NEW Registered Office Address:	Corporation Service Company 1201 Hays Street
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	
	Tallahassee ,FL 32301
hat after the change or changes are made, the Flor office of the registered agent will be identical. Or nereby confirmed that the change(s) was/were auti iability company or as otherwise provided in the a imited liability company.	nder the laws of the State of Florida, it is hereby confirmed rida street address of the registered office and the business, in the case of a Florida limited liability company, it is norized by an affirmative vote of the members of the limited articles of organization or the operating agreement of the
Signature of a member or authorized representative of a member)	
Deb Reeves, Authorized Representative (Printed or typed name of signee)	
I hereby accept the appointment as registered age comply with the provisions of all statutes relative in am familiar with and accept the obligations of my F.S. Or, if this document is being filed to merely re confirm that the limited liability company has been	ent and agree to act in this capacity. I further agree to to the proper and complete performance of my duties, and I position as registered agent as provided for in Chapter 608, reflect a change in the registered office address, I hereby in notified in writing of this change.
Sy: The Composition Service Com (Signature of Registered Agent) Corporation Service Com	
	PO Roy 6327 Tallahassee EL 32314

FILING FEE: \$25.00