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(Requestor's Name)				
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PICK-UP	MAIT	MAIL		
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ION SERVICE COMPANY	ACCOUNT NO.	: 120000000	_{L95} 11 AUG -4	AM 10: 44
	REFERENCE	: 867120	DEPARTMEN 7/8/43/599 00	IRPORATIONS OF
	AUTHORIZATION	Spull de	Man 1886	iki ri Ulang
	COST LIMIT	: \$\frac{1}{25}.00		
ORDER DATE :	August 2, 2011			
ORDER TIME :	9:54 AM			
ORDER NO. :	867120-010			
CUSTOMER NO:	7843599			
	CHANGE OF A	GENT		
NAME:	GLOBAL WARRAN	TY GROUP, LLC		
CERTIF	THE FOLLOWING AS IED COPY STAMPED COPY	PROOF OF FILI	'NG:	
CONTACT PERSON	: Stephanie Milr	nes		

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: GLOBAL WAI	RRANTY GROUP, LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	500 Middle County Road Suite 100
,	St. James, NY 11780
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	500 Middle County Road Suite 100 St. James, NY 11780 M09000002531
	· is
June 29, 2009	
3. Date of filing/registration in Florida 4	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	Florida Incorporators Inc.
Registered Office Address:	8875 Hidden River Pkwy., Suite 300 Tampa, FL 33637
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	Corporation Service Company
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
[MUST DE LEGRIDA STREET ADDRESS]	Tallahassee ,FL 32301
If the limited liability company is not organized under the lathat after the change or changes are made, the Florida street office of the registered agent will be identical. Or, in the cashereby confirmed that the change(s) was/were authorized by liability company or as otherwise provided in the articles of limited liability company. Signature of a member or authorized representative of a member)	address of the registered office and the business se of a Florida limited liability company, it is an affirmative vote of the members of the limited
Maureen Cathell, Authorized Person (Printed or typed name of signee)	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the prop am familiar with and accept the obligations of my position a F.S. Or, if this document is being filed to merely reflect a ch confirm that the limited liability company has been notified to	
	race E. Kirby, Asst. Vice President
Division of Corporations, P.O. Box 6	32/, Tallahassee, FL 32314

FILING FEE: \$25.00