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SECRETARY OF STATE
AND ANASSEE FLORIDA

MAR 1 2 2013 T. HAMPTON



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I2000000195

REFERENCE

COST LIMIT

ORDER DATE: March 11, 2014

ORDER TIME : 3:15 PM

ORDER NO. : 048622-010

CUSTOMER NO: 7764087

## CHANGE OF AGENT

NAME: AST NORTH AMERICA, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight

EXAMINER'S INITIALS:

## 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.

J. N	lame of the limited liability company: AST North Ame	rica, LLC	<u> </u>	<del></del>		<u></u>	
2. (a)	15281-83 NW 33rd Place  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)	(b	/	-83 NW 33r Mailing addre		-	
			·	(21012, 332)			
	Opalocka FL 33054	<u> </u>	Opalock	a FL 33054	<del></del>		
	07/20/2009	<u> </u>	M090000	02817	···-		
<i>3</i> .	Date of filing/registration in Florida	4.		Document	number		
5. (a)	BDB Agent Co.			_			
	Registered A gent and Registered Office shown on the records of the	he Florida	Dept. of State	E:			•
	5355 Town Center Road Ste 900					ΣS	201
	Registered Office Address [MUST BE FLORIDA STREET A	DDRESS)	!	•		ECRET	2014 MAR
	Boca Raton , FL_	33486		•		ARY C	= [
(b)	Corporation Service Company					15.01 15.01 15.01	WH IO:
	Enter name of NEW Registered Agent and/or NEW Registered (	DINCE NOR	ress		•	RIDA RIDA	12
	1201 Hays Street  NEW Registered Office Address:						
			•••				
	Tallahassee , FL_	32301					
he cha	mited liability company is not organized under the laws uge or changes are made, the Florida street address of ti ill be identical. On in the case of a Florida limited liab re authorized by an affirmative voil of the members of Tes of organization of the operative descent to the li	he registi	ered office npany, it is led liability ability qom	and the bus hereby con company o pany.	iness offic	e of the	registered
~	Circa Myllory		MICH		(2, (		00 60
	tre of a member or authorized representative of a member  y accept the appointment as registered agent and agree  ins of all statutes relative to the proper and complete per  gations of my position as registered agent as provided in  the registered office address, I he  fin writing of this change.	e to act in erformar for in Ch creby con		Printed or typ city. I furth uties, and I F.S. Or, if te limited li	•	•	with the and accept eing filed as been
Z	Burt.		Su	e G. Kniq It Vice P	aht		
•	Division of Corporations • P.O. Bo FILING FEI			ee, FL 323	14		