M09000003733

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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DEC 19 2011

EXAMINER

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 19 AM 9:58

CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 030588 7294749

AUTHORIZATION :

COST LIMIT : $ 25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 DEC 19 AM 9:58

ORDER DATE : December 19, 2011

ORDER TIME : 10:58 AM

ORDER NO. : 030588-005

CUSTOMER NO: 7294749

CHANGE OF AGENT

NAME: THE PRODUCT FULFILLMENT CENTER, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd

EXAMINER'S INITIALS: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
DEC 19 AM 9:38

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: The Product Fulfillment Center, LLC

2. (a) Principal office address of limited liability company: 2534 Winding Willow Lane
Spring, TX 77373

(Note: MUST BE STREET ADDRESS)

(b) Mailing address of limited liability company: 2534 Winding Willow Lane
Spring, TX 77373

(Note: MAY BE POST OFFICE BOX)

September 21, 2009
3. Date of filing/registration in Florida

M09000003733
4. Document number

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

Registered Agent: M. Williams

Registered Office Address: 5475 N.W. St. James Dr., #208
Port St. Lucie, FL 34983

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

NEW Registered Agent: Douglas A. Daniels

NEW Registered Office Address: 444 Seabreeze Blvd., Ste. 645
(MUST BE FLORIDA STREET ADDRESS)
Daytona Beach, FL 32118

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.

AV

Signature of a member or authorized representative of a member

Matthew Williams
Printed or typed name of signee

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.

Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: $25.00

DNHS18 (05/08)