M09000003744

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(!M. 8/5/14



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 jsmith2@cscinfo.com

Date: July 21, 2014

Order#: 212702-014

Re: RONEY CONCESSIONAIRE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

 \underline{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

14 JUL 23 PH 6: 11

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.

. (a) _	205 Concourse Boulevard	(b) 205 Concourse Boulevard
. , _	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	Santa Rosa C/ 95403	Santa Rosa, CA 95403
_	09/21/2009	M09000003744
	Date of filing/registration in Florida	4. Document number
. (a)	CT Corporation System	
` / -	Registered Agent and Registered Office shown on the records of	f the Florida Dept. of State:
	1200 South Pine Island Road	ADDRESS)
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS
		δ · ω · ·
		L_33324
	Plantation , F	L <u>33324</u> වූ වූ
(b)	Corporation Service Company	L_33324
	Enter name of NEW Registered Agent and/or NEW Registered	d Office address:
	1201 Hays Street	
	NEW Registered Office Address:	
	Nogasion of the real of the re	
	Tallahassee . F	L 32301
ne char gent w /as/wei	nge or changes are made, the Florida street address ill be identical. Or, in the case of a Florida limited	• •
Signati	are of a member or authorized representative of a member	Dona Priebe, Authorized PErson Printed or typed name of signee
- I hereb	y accept the appointment as registered agent and a	gree to act in this capacity. I further agree to comply with e performance of my duties, and I am familiar with and ac led for in Chapter 605, F.S. Or, if this document is being f I hereby confirm that the limited liability company has bee

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

Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Asst. VP