M0900003962

(Requestor's Name)						
(Address)						
(
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only



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15 JAN 15 PM 4: 09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA







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: January 13, 2015

Order#: 428153-009

Re: MICROEDGE, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

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.

OUCA.XCOA

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.

1. N	ame of the limited liability company: MICROEDGE,	LLC				
2 (a)		(b)				
2. (a)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(b)			
	619 West 54th Street 10th FL		619 Wes	t 54th Street 10th FL		
	New York NY 10019		New Yor	k, NY 10019		
	100.0		11017 101	K, 141 10010		
	10/02/2009		M090000	03962		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)	C T Corporation System					
(,	Registered Agent and Registered Office shown on the records of	the Florida	Dept. of State	e:		
	1200 South Pine Island Road				·	
	Registered Office Address (MUST BE FLORIDA STREET)	ADDRESS)		_	SECOND	
				_	AR	
	Plantation, FL	33324			FILED JAN 15 PM 4: 09 ECRETARY OF STATE LLAHASSEE, FLORIDA	
	, I'L	33324		_	PA CE	
(b)	Corporation Service Company			_	FS F.	
	Enter name of NEW Registered Agent and/or NEW Registered	Office add	ress:		96 86 87 87 87 87 87 87 87 87 87 87 87 87 87	
					A	
	1201 Hays Street NEW Registered Office Address:			-		
	NEW Registered Office Address:					
				_		
	Tallahassee , FL	32301				
				_		
If the	limited liability company is not organized under the law ange or changes are made, the Florida street address of	ws of the	State of Flo	orida, it is hereby cor	offirmed that after	
agent	will be identical. Or, in the case of a Florida limited li	ability co	mpany, it is	s hereby confirmed the	hat the change(s)	
was/w	ere authorized by an affirmative vote of the members of the operating agreement of the	of the limi limited li	ted liabilit ability con	y company or as othe npany.	erwise provided in	
/s/ Dona Priebe			•	authorized Person		
Signa	ature of a member or authorized representative of a member			Printed or typed name o	f signee	
I here provis the ob to mer notifie	by accept the appointment as registered agent and agrions of all statutes relative to the proper and complete ligations of my position as registered agent as provide ely reflect a change in the registered office address, I did in writing of this change.	ree to act performa d for in C hereby co	in this cap ince of my hapter 605 nfirm that	acity. I further agree duties, and I am fami 5, F.S. Or, if this doc the limited liability c	e to comply with the iliar with and accept ument is being filed company has been	
	film august					

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

Signature of Registered Agent Corporation Service Company BY: Sylvia Queppet, Asst. Vice President