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**EXAMINER** 



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ACCOUNT NO. : 12000000195

REFERENCE : 028160

7668038

AUTHORIZATION :

COST LIMIT : \$ 25.0

ORDER DATE: December 15, 2011

ORDER TIME : 10:31 AM

ORDER NO. : 028160-005

CUSTOMER NO: 7668038

## CHANGE OF AGENT

NAME: PANDORA FRANCHISING, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

\_ CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Becky Peirce

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: PANDORA F	RANCHISING, LLC	
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	* 6°C.	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	8671 Robert Fulton Drive, Ste A Columbia, MD 21046	
01/14/2010	M1000000184	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:  C T Corporation System	
Registered Agent:	- AAAAAAAAAAAAAA	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324 US	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent:</u> <u>NEW Registered Office Address:</u>	V Registered Office address:  Corporation Service Company  1201 Hays Street	
(MÜST BE FLORIDA STREET ADDRESS)	Tallahassee ,FL 32301	
If the limited liability company is not organized under the latter the change or changes are made, the Florida stree office of the registered agent will be identical. Or, in the cathereby confirmed that the change(s) was/were authorized be liability company or as otherwise provided in the articles of limited liability company.  (Signature of a member of authorized representative of a member)	t address of the registered office and the business ase of a Florida limited liability company, it is	
Maureen Cathell, Authorized Person (Printed or typed name of signee)	-	
I hereby accept the appointment as registered agent and a comply with the provisions of all statules relative to the pro am familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a c confirm that the limited liability company has been notified	gree to act in this capacity. I further agree to oper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, hange in the registered office address, I hereby I in writing of this change.	
By: Scan	Sylvia Queppet, Asst. VP	
Division of Corporations, P.O. Box		

**FILING FEE: \$25.00**