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EXAMINER



800207367838

TO ACKNOWLEDGE SUFFICIENCY OF FILING NECE IVEU DEPARTMENT OF STATE DIVISION OF CORPORATION

11 MAY 13 PM 1: 18



CORPORATION SERVICE COMPANY" *

ACCOUNT NO. : 12000000195

REFERENCE : 771562

4370303

AUTHORIZATION

COST LIMIT

ORDER DATE : May 9, 2011

ORDER TIME : 10:26 AM

ORDER NO. : 771562-004

CUSTOMER NO: 4370303

CHANGE OF AGENT

NAME: 20004 DELAWARE LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XXX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

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 608.5 company submits the following statement in order to chin the State of Florida.	4
1. Name of the limited liability company: 20004 DEI	LAWARE LLC 5
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	ny: 455 Magna Drive, 2nd Floor Aurora, Ontario, 14G 7A9 Canada
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	455 Magna Drive, 2nd Floor Aurora, Ontario, L4G 7A9 Canada
05/03/2010	M10000001991
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown or	the records of the Florida Dept. of State:
Registered Agent:	Corporation Service Company
Registered Office Address:	1201 Hays Street
	Tallahassee, FL 32301-2525
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u>	EW Registered Office address:
NEW Registered Agent:	C T Corporation System
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1200 South Pine Island Road
	Plantation, FL ,FL 33324
If the limited liability company is not organized under the that after the change or changes are made, the Florida stre office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was/were authorized liability company or as otherwise provided in the articles limited liability company. (Signature of a member or authorized representative of a member)	et address of the registered office and the business
Maureen Cathell, Authorized Representative (Printed or typed name of signee)	<u>re</u>
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the praining familiar with and accept the obligations of my position F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notified. To corporation System. By: Lathur, A. William, And Sandan.	agree 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, change in the registered office address, I hereby d in writing of this change.
(Signature of Registered Agent) Kathryn A. Wickles, Asst. Secretary Division of Corporations R.O. Par	. (200 Tallahanna El 20214

FILING FEE: \$25.00

INHS18 (05/08) .