m10000005423

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EXAMINE



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ORPORATION SERVICE COMPANY. ACCOUNT NO. : 12000000195

REFERENCE : 844797 7

AUTHORIZATION :

7840396

COST LIMIT : \$ 25.00

ORDER DATE : July 13, 2011

ORDER TIME : 9:16 AM

ORDER NO. : 844797-042

CUSTOMER NO: 7840396

CHANGE OF AGENT

NAME: MDT PERSONNEL CONTRACTS, 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 608.508, 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: MDT PERSO	ONNEL CONTRACTS, LLC	
2. (a) Principal office address of limited liability compare (Note: MUST BE STREET ADDRESS)	ny: 17757 US 19 North, Ste. 6 Clearwater, FL 33764	60
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		FIL SECRETARY ALLAHASSE
12/07/2010	M10000005423	e, Fl
3. Date of filing/registration in Florida	4. Document number	RID.
5. (a) Registered Agent and Registered Office shown or	n the records of the Florida De	pt. of State:
Registered Agent:	C T Corporation System	
Registered Office Address:	1200 South Pine Island Road Plantation, FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NI</u> <u>NEW Registered Agent</u> :	EW Registered Office addres Corporation Service Compa	_
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street	
	Tallahassec	_,FL_32301
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)	eet address of the registered of case of a Florida limited liabil	fice and the business it is
Maureen Cathell, Authorized Person (Printed or typed name of signee)	_	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pam familiar with and accept the obligations of my positio F.S. Or, if this document is being filed to merely reflect a confirm that the limited liability company has been notific	agree to act in this capacity. In this capacity. In the complete performant is registered agent as providus change in the registered officient in writing of this change.	I further agree to ice of my duties, and I led for in Chapter 608, e address, I hereby
By: (Signature of Registere Agent) Corporation Service Company		
Division of Corporations, P.O. Bo	Sylvia Queppet, Asst. vice P x 6327. Tallahassee, FL 3231	resident 14

FILING FEE: \$25.00