M11000001678

	equestor's Name)	
(**	,	
(A	ddress)	
(A	ddress)	
(C	city/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
(E	Business Entity Name)	
<u>-</u>		
(C	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to Filing Officer:		

Office Use Only



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11/13/13--01013--006 **25.00





CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Ellen Rosaio erosaio@cscinfo.com

Date: November 8, 2013

Order#: 878920-002

Re: STRAIGHT LINE PERFORMANCE SOLUTIONS, 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: Ellen Rosaio

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.

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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: STRAIGHT L	INE PERFORMANCE SOLUTIONS, LLC
2. (a) Principal office address of limited liability compa (Note: MUST BE STREET ADDRESS)	any: 121 Honness Lane, Ithaca, NY 14850
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	121 Honness Lane, Ithaca, NY 14850
04/04/2011	M11000001678
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown of	on the records of the Florida Dept. 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>N</u>	EW Registered Office address:
NEW Registered Agent:	Corporation Service Company 😘
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Tallahassee FL32301
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ideliability company, it is hereby confirmed that the change the members of the limited liability company or as other the operating agreement of the limited liability company	e Florida street address of the registered office entical. Or, in the case of a Florida limited e(s) was/were authorized by an affirmative vote of wise provided in the articles of organization or
Dona Priebe, Authorized Person Printed or typed name of signee I hereby accept the appointment as registered agent and	—— d goree to act in this capacity. I further goree to
comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability company. By: Signature of Registered Agent Corporation Service Company	proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.

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