71100003357

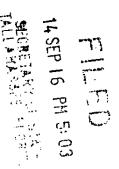
(Requestor's Name)						
(Address)						
(Address)						
(Cit	y/State/Zip/Phone	· #)				
PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificates	of Status				
Special Instructions to Filing Officer:						
,						

Office Use Only



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09/16/14--01010--018 **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: Grace Kirby gkirby3@cscinfo.com

Date: September 12, 2014

Order#: 288363-075

Re: IMG COLLEGE, 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: Grace Kirby

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.

QUCA.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.	Na	me of the limited liability company: IMG COLLEGE,	LLC			
2	(a)	540 North Trade Street	(b) 540 North Trade Street			
	(4)	Principal office address of limited liability company:	_ (0,		Mailing address of limited liability company:	
		(Note: MUST BE STREET ADDRESS)			(Note: MAY BE POST OFFICE BOX)	
		Winston-Salem, NC 27101	-	Winston-S	Salem, NC 27101	
			_			
		06/30/2011		M1100000	03357	
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 th	e Florida	Dept. of State	:	
1200 South Pine Island Road						
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)					
		Disabelias	00004			
		Plantation , FL_	33324		Fig. 7	
	(b)	Corporation Service Company			S S TT	
Enter name of NEW Registered Agent and/or NEW Registered Office address:						
					The second second	
		1201 Hays Street			T T	
		NEW Registered Office Address:			() D	
					ို ့ံ ယ	
		Tallahassee , FL_	32301			
1£	the li	mited liability company is not organized under the laws	c of the	State of Ela	ride it is hereby confirmed that after	
the	e cha	nge or changes are made, the Florida street address of the	he regis	ered office	and the business office of the registered	
		vill be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of				
		cles of organization or the operating agreement of the li				
_		000	Dona	Priebe, Au	uthorized Person	
1	Signat	ure of a member or authorized representative of a member			Printed or typed name of signee	
I. pr	herel oviși	by accept the appointment as registered agent and agree ons of all statutes relative to the proper and complete p	e to act erforma	in this capa nce of my a	ncity. I further agree to comply with the luties, and I am familiar with and accept	
to no	mere tified	ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided by reflect a change in the registered office address, I he I in writing of this change.	ereby co	nfirm that t	he limited liability company has been	
		re of Registered Agent Corporation Service Company				
Si	gnatui	e of Registered Agent Corporation Service Company	BY: Gr	ace E. Kir	by, Assistant VP	

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