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## FLORIDA FILING & SEARCH SERVICES, INC.

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11/15/2013

NAME:

RETRIEVEX ACQUISITION LLC II, LLC

TYPE OF FILING: CHANGE OF AGENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

**AUTHORIZATION:** 

## 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 bolh, in the State of Florida.

agon, or com, in the state of Fortua.	RETRIEVEX ACQUISITION LLC II, LLC
1. Name of the limited liability company:	6902-G PATTERSON PASS
2. (a) Principal office address of limited liabili	ty company:
(Note: MUST BE STREET ADDRES	<u>Livermore, CA 94550</u>
(b) Mailing address of limited liability comp	6002 C DATTERSON DASS
(Note: MAY BE POST OFFICE BOX	() Livermore, CA 94550 ش
December 29, 2011	M120000000 € 3 € -
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:
Registered Agent:	Corporation Service Company 5
Registered Office Address:	1201 Hays Street
	Tallahassee, Florida 32301-2525
(b) Enter name of <u>NEW Registered Agent</u> <u>NEW Registered Agent:</u>	National Corporate Research, Ltd., Inc.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADD)	155 Office Plaza Drive
(MOST BE TEORIDA STREET ADDI	Tallahassee ,FL 32301
confirmed that after the change or changes are a	l under the laws of the State of Florida, it is hereby made, the Florida street address of the registered office vill be identical. Or, in the case of a Florida limited the change(s) was/were authorized by an affirmative vote or as otherwise provided in the articles of organization ty company.
//	:F
Printed or typed name of signee	<del></del>
I hereby accept the appointment as registered comply with the provisions of all statutes relative and I am familiar with and accept the obligation Chapter 608, F.S. Or, if this document is being address, I hereby confirm that the limited liabil	agent and agree to act in this capacity. I further agree to ve to the proper and complete performance of my duties, ns of my position as registered agent as provided for in filed to merely reflect a change in the registered office ity company has been notified in writing of this change.
Signature of Registered Agent Lucy Rose, Assista	ant Secretary
	O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00