M12000003935

(Re	equestor's Name)	<u> </u>
(Ad	ldress)	
(Ad	ldress)	,
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



400258215354

SUFFICIENCY OF FILING

28 M APR -2 M 11: 13

FILED SINGE INVESTMENT OF AN APPROXIMATION OF AN APPROXIMATION OF A CO

RARDON8 Mary 4, 14

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

4/2/2014

NAME:

ABRAMSON LLC

TYPE OF FILING: CHANGE OF AGENT

COST:

\$25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL/HODGE

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114, 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. Nar	ne of the limited liability company: _A	BRAMSON L	-ĽÇ:		
2. (a) Principal office address of limited lia (Note: MUST BE STREET ADDR		gility company:			
		(200)	BIRMINGHAM, AL 35217		
(b) Mailing address of limited liability c		company:	2595 PAWNEE VILLAGE ROAD		
	(Note: MAY BE POST OFFICE B	<u>0x</u>) .	BIRMINGHAM, AL 35217		
July 1	1, 2012		M12000003935		
3. Dat	e of filing/registration in Florida	4	. Document number		
5. (a)	Registered Agent and Registered Off	ice shown on th	e-records of the Florida Dept.	of State:	
	Registered Agent:		TIBCO, INC.	-,ō	
Registered Office Address:			دی 2605 THOMAS DRIVE		
	3		SUITE 150		
			PANAMA CITY BEACH, FL. 32408		
(b)	Enter name of <u>NEW Registered Age</u> <u>NEW</u> Registered Agent:	nt and/or <u>NEW</u>	Registered Office address: National Corporate Research,	, Ltd., Inc.	
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		•	155 Office Plaza Drive		
		DRESS)	700 011000 11000 01110		
		 -	Tellahassee,	FL 32301	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. Signature of tenember or authorized representative of a member					
Srea	Abramson				
	or typed name of signee				
I herely comply and I a Chapte addres.	by accept the appointment as registere with the provisions of all statutes rela m familiar with and accept the obliga ir 605, F.S. Or, if this document is bei s, higreby confirm that the limited lia		ree to act in this capacity. I fuer and complete performance tion as registered agent as problem the reginal been notified in writing of	orther agree 10. of my duties, ovided for in stered office this change.	
Jigiqiiqii	e of Registered Agent Lucy Rose, Assista	nt Secretary	m multiplication my sasses		
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00					

INHS18 (12/13)