## M12000005589

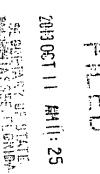
(Requestor's Name)				
(Address)				
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(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(D)				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Vera M. Norris

Date: October 9, 2013

Order#: 825134-054

Re: SERVICE ZONE HOLDINGS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

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: Vera M. Norris

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

2019 OCT | | AM Î1: 25

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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.

	. 3		
1. Na	me of the limited liability company: SERVICE ZONE	HOLDINGS, LLC	·····
2. (a) Principal office address of limited liability company: 310 (Note: MUST BE STREET ADDRESS)		y: 3102 West End Avenue Su Nashville, TN 37203	ite 1000
(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	3102 West End Avenue Sui Nashville, TN 37203	ite 1000
10/05/:	2012	M12000005589	
3. Dat	te of filing/registration in Florida	4. Document number	2813
5. (a)	Registered Agent and Registered Office shown on	the records of the Florida D	
	Registered Agent:	C T Corporation System	33 <u> </u>
	Registered Office Address:	1200 South Pine Island Rd Plantation, FL 33324	S 4 S S S S S S S S S S S S S S S S S S
(b)	Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u>	W Registered Office addre	•
	NEW Registered Agent:	Corporation Service Company	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)		1201 Hays Street	
	THE STATE OF THE S	Tallahassee	,FL 32301
confirmand the liability the method open	imited liability company is not organized under the med that after the change or changes are made, the Fe business office of the registered agent will be idently company, it is hereby confirmed that the change(s) embers of the limited liability company or as otherwise rating agreement of the limited liability company.	lorida street address of the rical. Or, in the case of a Flowas/were authorized by an	registered office orida limited Laffirmative vote of
	Priebe, Authorized Person or typed name of signee	_	
	by accept the appointment as registered agent and a wwith the provisions of all statules relative to the pr im familiar with and accept the obligations of my po er 608. F.S. Or, if this document is being filed to me as, I hereby confirm that the limited liability compan	gree to act in this capacity. Sper and complete perform sition as registered agent a rely reflect a change in the v has been notified in writin	I further agree to ance of my duties, s provided for in registered office ig of this change.
By:	Selvin august		
Signatut	e of Registered Agent Corporation Service Company	Sylvia Queppet, Asst. Vice	e President

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