## MH000002555

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL.
(Business Entity Name)		
(50	iomooo Enary Mar	
(5)		
(DC	ocument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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7/31/14



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Lindsey Lockard llockar2@cscinfo.com

Date: July 11, 2014

Order#: 200914-007

Re: ADVANTAGE ON CALL, 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: Lindsey Lockard

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, 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.

out, with state of the table			
1. Name of the limited liability company: ADVANTAGE O	N CALL, LLC		
2. (a) Principal office address of limited liability company ( <i>Note: MUST BE STREET ADDRESS</i> )	8892 Beckett Road		
(	West Chester, OH	45069	
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)		AS 1	
04/11/2014	M14000002555	202	
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:	C T Corporation System	0.40	
Registered Office Address:	1200 South Pine Island Road		
	Plantation	FL 33324	
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW NEW Registered Agent</u> :	Corporation Service Comp		
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street		
	Tallahassee	<sub>,FL</sub> 32301	
If the limited liability company is not organized under the loonfirmed that after the change or changes are made, the Fland the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwithe operating agreement of the limited liability company.  Signature of member or authorized representative of a member	orida street address of the ical. Or, in the case of a F was/were authorized by a	registered office Florida limited in affirmative vote of	
Dona Priebe, Authorized Person			
Printed or typed name of signee	_		
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the pround I am familiar with and accept the obligations of my pochapter 605, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company By:	gree to act in this capacit oper and complete perfori sition as registered agent rely reflect a change in th y has been notified in writ	y. I further agree to nance of my duties, as provided for in e registered office ing of this change.	
Signature of Registered Agent Corporation Service Company	Sylvia Queppet, Asst. Vi	ce President	

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