Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000264934 3)))



H110002649343ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number: I2000000195 Phone : (850)521-1000 Fax Number : (850)558-1515

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

REGISTERED AGENT CHANGE IN YOUR DREAMS INTERNATIONAL, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$35.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

11-7-11

11/7/2011

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of | change is submitted for a corporation | 7.0502, 607.1508, or 617.1508, Florida Statutes, this organized under the laws of the State of Florida | |
|--|---|--|--------|
| | * ** | registered agent, or both, in the State of Florida. | |
| 1. The name | of the corporation: IN YOUR DREA | AMS INTERNATIONAL, INC. | |
| 2. The princi | ipal office address: 200 Corporate Pla | ace, Suite 5B | _ |
| Peabody | y, MA 01960 | | |
| 3. The mailir | ng address (if different): | | _ |
| 4. Date of inc | corporation/qualification: 1/31/2002 | Document number: P02000011310 | +0.0 |
| | and street address of the current register epartment of State: | ered agent and registered office on file with the | |
| | Business Filings Incorporated | ~1 | |
| | 1203 Governor's Square Blvd. | Suite 101 Suite 101 SECRETAR | 7 |
| | Tallahassee F L 32301-2960 | AHAN AHAN | |
| 6. The name (if changed | | d agent (if changed) and /or registered office | [[|
| | Corporation Service Company | FLORI STATE | |
| | 1201 Hays Street | | |
| | (P.O. Box NOT aco | epxahte) | |
| | Tallahassee, FL 32301 | | |
| The street ad as changed v | ddress of its registered office and the swill be identical. | street address of the business office of its registered agent, | |
| | _ | lopted by its board of directors or by an officer so connotified in writing of the change. | |
| / | ween. Citley | Maureen Cathell, Vice President | |
| hereby according to the following the follow | ephine of an officer or director) ept the appointment as registered age ee to comply with the provisions of al and I am familiar with and accept th being filed merely to reflect a change has been notified in writing of this ch ation Scrvice Company | (Printed or typed name and title) ant and agree to act in this capacity. I statutes relative to the proper and complete performance e obligation of my position as registered agent. Or, if this in the registered office address, I hereby confirm that the ange. | |
| Ву: | Dros. Lott-tony | October 25, 2011 | |
| | (Signature of Registered Agent) | (1)atc) | |
| | behalf of an entity: | | |
| Grace E. K | irby, Assistant Vice President | • | |
| | (Typed or Printed Name) | 0 7777 | |
| | * * * £11 TN | C. RFF. 935 AA * * * | |