## P03000043023

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NOV 27 2013 T. CARTER



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Sylvia Queppet

squeppet@cscinfo.com

Date: November 19, 2013

Order#: 841625/002

Re: ATLIN, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35\_\_\_.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Sylvia Queppet

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

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

statement of cha	nge is submitted for a corporation or	0502, 607.1508, or 617.1508, Florida Statutes, the ganized under the laws of the State of Florida gistered agent, or both, in the State of Florida.	is	
1. The name of	the corporation: ATLIN, INC.			
2. The principal	office address: 2350-N 34th Street N	orth, St. Petersburg, FL 33713		_
3. The mailing a	address (if different):			<del>-</del>
4. Date of incorp	poration/qualification: 04/14/2003	Document number: P03000043023		
5. The name and		ed agent and registered office on file with the		
	Richard L. Stevens			
	ODEO NI OASE Character No. 10		<b>13</b>	: - C
	St. Petersburg	FL 33713		
6. The name and (if changed):	·	agent (if changed) and /or registered office	3 NOV 21 FH 12: 42	17.00
	Corporation Service Company		5	
	1201 Hays Street		, ,	, <del></del>
	PO Box Tallahassee	NOT acceptable  FL 32301		
		reet address of the business office of its registere pted by its board of directors or by an officer so notified in writing of the change.		
(3n)	uro plan officer of chector	Bryon Koepke, Assistant Secretary		
I hereby accept I further agree performance of agent. Or, if the hereby confirm Corporation	9	t and agree to act in this capacity. statutes relative to the proper and complete nd accept the obligation of my position as regist reflect a change in the registered office address ed in writing of this change.		
By:	Spature of Registered Agent	11-19-2013		
_	chalf of an entity:	AF 1104		
Sylvia Queppe	t, Assistant Vice President			
ì	Typed or Printed Name  * * * FILING	FEE: \$35.00 * * *		