P0400000518

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(Ci	ty/State/Zip/Phone	· #)
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(Do	ocument Number)	
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04/17/13--01026--010 **35.00

SCORTIARY OF STATE

RARO (Ch 8 10 4.23,13



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: April 15, 2013

Order#: 604092/004

Re: PAVILION BROKERAGE COMPANY

Enclosed please find:

XX ___ Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

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:Vera M. Norris 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 ch	ange is submitted for a corpora	tion organized under the laws of the State of Florida	
		e or registered agent, or both, in the State of Florida.	
1. The name of	the corporation: PAVILION BRO	OKERAGE COMPANY	
2. The principa	l office address: 5605 Carnegie	Blvd., Suite 110	
Charlotte, N			
3. The mailing	address (if different):		
4. Date of incom	rporation/qualification: 04/07/20	004 Document number: P04000060578	
	nd street address of the current reartment of State: (If resigned, ent	egistered agent and registered office on file with the ter resigned)	
	Todd Carr		
	2929 Alamo Dr.		
	Orlando, FL 32805		
6. The name an (if changed):		stered agent (if changed) and /or registered office	
	Corporation Service Compan	y	
	1201 Hays Street		
	P.	O. Box NOT acceptable	
	Tallahassee, FL 32301		
The street addr as changed wil	ress of its registered office and the identical.	the street address of the business office of its registered agent,	
Such change wanthorized by t	vas authorized by resolution dul the board, or the corporation has	y adopted by its board of directors or by an officer so s been notified in writing of the change.	
026	2	Dona Priebe, Vice President	
Signat	ure of an officer or director	Printed or typed name and title	
I further agrée performance o agent. Or, if th hereby confirm	to comply with the provisions of f my duties, and I am familiar w	agent and agree to act in this capacity. of all statutes relative to the proper and complete with and accept the obligation of my position as registered ely to reflect a change in the registered office address, I notified in writing of this change.	
By: Drose t-Knoy		April 9, 2013	
Si	gnature of Registered Agent	Date	
If signing on b	ehalf of an entity:		
Grace E. Kirby	, AVP		
-	Typed or Printed Name		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (03/12)

* * * FILING FEE: \$35.00 * * *