P04000093278

(Re	equestor's Name)	
(Ad	ldress)	
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,	101033)	
(Cit	ty/State/Zip/Phone	∍ #)
PICK-UP	☐ WAIT	MAIL
(D.		
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status

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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROJEG

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:	Cloverfield Inves	stments. Inc.		
SUBJECT.	Name of C	Corporation		
DOCUMENT NUMBER: P0400093278				
The enclosed Statement of	Change of Registered Office	ce/Agent and fee are subr	nitted for filing.	
Please return all correspon	dence concerning this matte	r to the following:		
	Debra Mi Name of Co	Illinowisch Intact Person		
	Quarles &	Brady LLP		
300 N. LaSalle St., Suite 4000				
	Ado	lress	·	
	Chicago, City/State a	IL 60654 nd Zip Code		
E-mai	cpajay@ address: (to be used for	aol.com future annual report no	tification)	
For further information co	ncerning this matter, please	call:		
	1illinowisch	at (312)	715-5000 time Telephone Number	
Name of Co	ontact Person	Area Code & Day	time Telephone Number	
Enclosed is a \$35.00 check	made payable to the Depar	tment of State.		
D P.	ailing Address: mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Street Addres Amendment Division of C Clifton Build 2661 Execut	Section Corporations	

Tallahassee, FL 32301

Tallahassee, FL 32314

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Flori ange is submitted for a corporation organized under the laws of the State ar to change its registered office or registered agent, or both, in the State	of Florida
1. The name of t	the corporation: Cloverfield Investments, Inc.	
2. The principal	office address: 9600 West Sample Road, Suite 500, Coral Sp	orings, FL 33065
3. The mailing a	address (if different):	
4. Date of incorp	poration/qualification: 6/17/2004 Document number:	P04000093278
	d street address of the current registered agent and registered office on file rtment of State: (If resigned, enter resigned)	e with the
	Naples-Lawdock, Inc.	
	1395 Panther Ln., # 300	
	Naples, FL 34109	11 SEC
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered	CRETARY OF
	Jay Serbin	
	9600 W. Sample Road, Suite 500	
	P.O. Box NOT acceptable Coral Springs, FL 33065	
The street addre as changed will	ess of its registered office and the street address of the business office be identical.	of its registered agent,
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by ne board, or the corporation has been notified in writing of the change.	an officer so
- Signatur	Jay Serbin, Vice Printed or typed name a	President ditte
l further agree t of my duties, an document is bei	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and d I am familiar with and accept the obligation of my position as regising filed merely to reflect a change in the registered office address, I he been notified in writing of this change.	complete performance tered agent. Or, if this ereby confirm that the
Jr.	Sevi 12/1/	
J 5.5.	half of an entity:	
	L (We STranks, / Jan / JAT SERSIN Apped or Printed Name	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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