

(R	equestor's Name)			
(A	ddress)			
(A	ddress)	sue .		
(C	ity/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
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Special Instructions to Filing Officer:				

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AUG 0 6 2015

R. WHILE



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

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Janis M. Smith janis.smith@cscglobal.com

Date: August 3, 2015

Order#: 723547-018

Re: THE ASSOCIATED PRESS

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 Please return evidence to the following:

Attn: Janis M. Smith

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 CORPORATIONS

statement of cha	nge is submitted for a corporation	617.0302, 607.1308, or 617.1308, Florida on organized under the laws of the State of or registered agent, or both, in the State of	f NY
1. The name of t	he corporation: THE ASSOCIAT	ED PRESS	
2. The principal 9100 N.W. 3	office address:6th Street, Ste 111, Miami, FL 3	33178	
-	ddress (if different):33rd St, Attn: Tax Dept, New Yo	ork, NY 10001	
4. Date of incorp	poration/qualification: 11/03/198	Document number: P1198	7
	street address of the current reg tment of State: (If resigned, ente	istered agent and registered office on file resigned)	with the
	Baltzelle, James		_ }: 5
	9100 NW 36th St		AR SE
	Miami	FL 33178	15 SE
6. The name and (if changed):	street address of the new registe	ered agent (if changed) and /or registered o	
	Corporation Service Company		₩ 5 -
	1201 Hays Street		
	P.O Tallahassee	Box NOT acceptable FL 32301	_
		e street address of the business office of adopted by its board of directors or by a been notified in writing of the change.	
T		Dona Priebe	Vice President
I hereby accept I further agree t performance of agent. Or, if thi hereby confirm	to comply with the provisions of my duties, and I am familiar wi is document is being filed merel	Printed or typed name and agent and agree to act in this capacity. all statutes relative to the proper and coth and accept the obligation of my positive to reflect a change in the registered off otified in writing of this change.	omplete on as registered
By: Wrace &	-Kubi,	07/27/2015	
	nature of Registered Agent	Date	
If signing on bel	half of an entity:		
	Assistant Vice President /ped or Printed Name	_	

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