P12000099284

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SECRETARY OF STATE
TALLAHASSEE, FLORIT

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COVER LETTER

то:	Amendment Section Division of Corporation	s							
SUBJECT:		CIP PEO II, Inc.							
		Name of Co	orporation						
DOCU	MENT NUMBER:	P12000099284							
The en	closed Statement of Chan	ge of Registered Office	c/Agent ar	nd fee are	submitted for f	iling.			
Please	return all correspondence	concerning this matter	to the fol	lowing:					
		Darlene Lemke							
		Name of Con	tact Perso	n					
	CoAdvantage								
	Firm/Company								
		111 W Jefferson St							
		Addr	ess						
		Orlando, FL 32801							
		City/State and Zip Code							
		dlemke@coadvanta	age.com						
	E-mail address: (to be used for future annual report notification)								
For fur	ther information concerni								
	Darlene Lemke		at (<u>4(</u>	07	447-1895 Daytime Teler				
	Name of Contact	Person	Are	a Code &	Daytime Telep	hone Nu	nber		
Enclose	ed is a \$35.00 check made	e payable to the Depart	ment of S	tate.		SECRE!	13 OCT -		
	<u>Mailing</u>	Address:		Street A	ddress:	ASS	_		
		ment Section			nent Section	mercinal mark	P	ľ	
	P.O. Bo	n of Corporations			n of Corporatio Building	ns To	2	Ţ	
		ssee, FL 32314			ecutive Center	Circle	PH 12: 2:		
					see, FL 32301	97. 39	ယ		

CR2E045 (03/12)

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

•	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of FLORIDA					
in order to change its register	red office or registered agent, or both, in the State of Florida.					
1. The name of the corporation:	CIP PEO II, Inc.					
2. The principal office address:	3350 Buschwood Park Drive - Ste 200					
	Tampa, FL 32801					
3. The mailing address (if different):	111 W Jefferson St					
	Orlando, FL 32801					
4. Date of incorporation/qualification:	12/04/2012 Document number: P12000099284					
5. The name and street address of the c Florida Department of State: (If resign	current registered agent and registered office on file with the gned, enter resigned)					
Mark Lowrey						
111 W Jefferso	on Street					
Orlando, FL 32801						
6. The name and street address of the n (if changed):	ew registered agent (if changed) and /or registered office					
Jeffrey J. Sjobe	eck					
3350 Buschwo	3350 Buschwood Park Dr - Ste 200					
	P.O. Box NOT acceptable					
Tampa, FL 33	618					
The street address of its registered offias changed will be identical.	ice and the street address of the business office of its registered agent,					
Such change was authorized by resolu authorized by the board, or the corpora	tion duly adopted by its board of directors or by an officer so ation has been notified in writing of the change.					
W.W.	A Miguel A. Maseda, President/대한 모두					
Signature of an officer or director	Printed or typed name and title					
I further agree to comply with the prov performance of my duties, and I am fa	gistered agent and agree to act in this capacity. visions of all statutes relative to the proper and completed of miliar with and accept the obligation of my position as registered led merely to reflect a change in the registered office address, as been notified in writing of this change.					
	9/30/13					
User Marie of Registered Agent	Date					
If signing on behalf of an entity:						
Jeffrey J. Sjobeck						

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