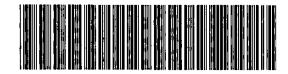
P12000099291

(Requestor's Name)			
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(City/State/Zip/Phone #)			
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PICK-UP WAIT MAIL			
(Dusiness Entity Name)			
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13 OCT - 1 PH 12: 2: SECRETARY OF STATANAL ALLAHASSEE, FLORE

COVER LETTER

TO:	Amendment Section Division of Corporation	on rations		
CITE	ECT:	CIP PEO III, Inc.		
SODO	EC1,	Name of	Corporation	_
DOC	UMENT NUMBER	P12000099291		_
The e	nclosed Statement of	Change of Registered Offi	ce/Agent and fee are submitted for	r filing.
Please	e return all correspon	dence concerning this matt	er to the following:	
		Darlene Lemke		
		Name of Co	ontact Person	-
		CoAdvantage		
		Firm/C	Company	
		111 W Jefferson		
Address				
		Orlando, FL 328		_
		City/State a	and Zip Code	
		dlemke@coadva	ntage.com	
	E-mai	address: (to be used for	future annual report notification	1)
For fu	urther information co	ncerning this matter, please	call:	
	Darlene Lemke		at (407) 447-1895 Area Code & Daytime Tel	
	Name of Co	ontact Person	Area Code & Daytime Tel	ephone Numbe
Enclo	sed is a \$35.00 check	made payable to the Depa	rtment of State.	13 OCT - I SECRETAR TALLAHASS
	<u>M</u> As	ailing Address: mendment Section	Street Address: Amendment Section	-1 F ASSEE

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

CR2E045 (03/12)

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

statement of change is submitted for a	607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this corporation organized under the laws of the State of FLORIDA red office or registered agent, or both, in the State of Florida.				
1. The name of the corporation:	CIP PEO III, 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: P12000099291				
	current registered agent and registered office on file with the				
Mark Lowrey	·				
111 W Jefferson Street					
Orlando, FL 3	2801				
6. The name and street address of the r (if changed):	new registered agent (if changed) and /or registered office				
Jeffrey J. Sjob	eck				
3350 Buschwo	3350 Buschwood Park Dr - Ste 200				
	P.O. Box NOT acceptable				
Tampa, FL 33	618				
The street address of its registered off as changed will be identical.	ice and the street address of the business office of its registered agent,				
Such change was authorized by resolution authorized by the board, or the corpor	ntion duly adopted by its board of directors or by an officer so ation has been notified in writing of the change.				
Signature of an officer or director	Miguel A. Maseda, President/CEO Printed or typed name and title				
I hereby accept the appointment as re I further agree to comply with the pro performance of my duties, and I am for agent. Or, if this document is being for	gistered agent and agree to act in this capacity. wisions of all statutes relative to the proper and completed miliar with and accept the obligation of my position as egistered iled merely to reflect a change in the registered office address, as been notified in writing of this change.				
signature of Registered Agent	Date C.S. 72. O.R. 22				
If signing on behalf of an entity:					
Jeffrey J. Sjobeck					
Typed or Printed Name					

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