P28510

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 12000000195

REFERENCE

915401

7518884

AUTHORIZATION C

COST LIMIT

ORDER DATE: September 19, 2011

ORDER TIME: 9:18 AM

ORDER NO. : 915401-010

CUSTOMER NO: 7518884

CHANGE OF AGENT

NAME:

PREMIER ADMINISTRATIVE

SOLUTIONS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XX ____ PLAIN STAMPED COPY

CONTACT PERSON: Stephanie Milnes

EXAMINER'S INITIALS:

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

statement of ch	ange is submitted for a corporation orga	502, 607.1508, or 617.1508, Florida Statutes, this unized under the laws of the State of Delaware stered agent, or both, in the State of Florida.	
1. The name of	the corporation: PREMIER ADMIN	ISTRATIVE SOLUTIONS, INC.	
2. The principal	l office address:		
1000 118th	h Avenue N, St. Petersburg, FL 337	16	
3. The mailing a	address (if different):		
4. Date of incor	poration/qualification: 03/14/1990	Document number: P28510	
	d street address of the current registered rtment of State:	agent and registered office on file with the	
	Jennifer M Schmidt		
	1000 118th Avenue N		<i>p</i> .
	St. Petersburg, FL 33716		
6. The name and (if changed):	d street address of the new registered age	ent (if changed) and /or registered office	FILE
	Corporation Service Company	EEG 7	2 1
	1201 Hays Street	FLO	w
	(P.O. Box NOT acceptable	<u> </u>	မှာ
	Tallahassee, FL 32301	- -	
The street addre as changed will	ess of its registered office and the stree be identical.	t address of the business office of its registered ag	jent,
Such change wa authorized by th	as authorized by resolution duly adopte he board, or the corporation has been n	ed by its board of directors or by an officer so otified in writing of the change.	
May	ure of an officer or director)	Maureen Cathell, Vice President (Printed or typed name and title)	<u></u>
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent a to comply with the provisions of all sta ad I am familiar with and accept the ob ing filed merely to reflect a change in to s been notified in writing of this chango		ance this the
By: <	on Service Company	09/14/2011	
——————————————————————————————————————	gnature of Hogistered Agent)	(Date)	
If signing on be	half of an entity:		
~	et, Asst. Vice President		
(1	* * * FILING F	FF: \$35.00 * * *	
	FILING F	tala ψυψιVU	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314