## P9300021350

| (Re                                     | questor's Name)   |           |  |  |  |
|---|-------------------|-----------|--|--|--|
| (Address)                               |                   |           |  |  |  |
| (Ad                                     | dress)            |           |  |  |  |
| (Cit                                    | y/State/Zip/Phone | e #)      |  |  |  |
| PICK-UP                                 | ☐ WAIT            | MAIL      |  |  |  |
| (Business Entity Name)                  |                   |           |  |  |  |
| (Document Number)                       |                   |           |  |  |  |
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CSC - WILMINGTON, Suite 400 ... 2711 Centerville Road Wilmington De 19808 800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Alex Mcdow alex.mcdow@cscglobal.com

Date: March 9, 2017

Order#: 549172/005

Re: DIMENSIONS OF SOUTH FLORIDA, INC.

Enclosed please find:

XX \_\_ Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Alex Mcdow c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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

|   | provisions of sections 607   |   |   |  |                       |  |
|---|--|---|---|--|-----------------------|--|
| -   | ange is submitted for a cor<br>er to change its registered   |   |   | •  |                       |  |
|   | the corporation: Dimensio  |   |   |  |                       |  |
| 2. The principal  | office address: 4900 Nort  | h Ocen Blvd., Apt 1208                                  |   |  | <del></del>           |  |
| 3. The mailing a  | address (if different):  |   |   | Plate St. View and the state of |                       |  |
| 4. Date of incor  | poration/qualification: 03   | /22/1993 Doc  | ument                                   | number: P930000213   | 50                    |  |
|   | d street address of the curr<br>rtment of State: (If resigne   |   | egister                                 | ed office on file with th  | DUNT MAR 13 P         |  |
|   | Richard Lehman   |   |   |  |                       |  |
|   | 2600 N Military Trail, #270  |   |   |  |                       |  |
|   | Boca Raton   |   | FL                                      | 33308  | 3: 5                  |  |
| 6. The name and (if changed):   | I street address of the new  | registered agent (if chang                              | ged) an                                 | d /or registered office  | 5                     |  |
|   | Corporation Service Cor  | npany   |   |  | ·                     |  |
|   | 1201 Hays Street   |   |   |  |                       |  |
|   | P.O. Box NOT acceptable  |   |   |  |                       |  |
|   | Tallahassee  |   | FL                                      | 32301  | ٠                     |  |
| The street addre  | ess of its registered office<br>be identical.  | and the street address of                               | the bu                                  | siness office of its regi  | stered agent,         |  |
| Such change wa<br>authorized by th  | ns authorized by resolution<br>ne board of the corporation   | n duly adopted by its boa<br>on has been notified in wi | rd of c                                 | lirectors or by an office of the change.   |                       |  |
| \ gen   | lo de  | Rice  |   | - 1000 IN 2  | PRESIDENT             |  |
| I hereby accept<br>I further agree i<br>performance of<br>agent. Or, if the<br>hereby confirm | the appointment as regist to comply with the provision of | тегену во гезнесь а спапу                               | act in<br>e to th<br>bligat<br>ge in tl | re registerea office aaa   | egistered<br>fress, I |  |
| By: Drag  | · Cokubi   | 03  | 3/09/2                                  |  |                       |  |
| · ·   | nature of Registered Agent   |   |   | Date   | -                     |  |
| ~ -   | half of an entity:   |   |   |  |                       |  |
| ·   | Assistant Vice President   | <del></del>   |   |  |                       |  |
| 1)  | yped or Printed Name   |   |   |  |                       |  |

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