Requester's Name WINDMERE-DURABLE City/State 5980 Miami Lakes Drive Miami Lakes, Florida 33014-2467 Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) (Corporation Name) (Document #) ☐ Certified Copy Pick up time Walk in ☐ Will wait Photocopy Certificate of Status Mail out **NEW FILINGS AMENDMENTS** Amendment ☐ Profit Resignation of R.A., Officer/Director Not for Profit Change of Registered Agent ☐ Limited Liability Domestication Dissolution/Withdrawal Other Merger **OTHER FILINGS** REGISTRATION/QUALIFICATION Annual Report ☐ Foreign Limited Partnership ☐ Fictitious Name Reinstatement Trademark Other Examiner's Initials

CR2E031(7/97)

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

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State ofFlorida |
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| submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. |
| 1. The name of the corporation is: Breakroom of Tennessee, Inc. |
| 2. The mailing address of the corporation is: 5980 Miami Lakes Drive, Miami Lakes, Florida 33014 |
| 3. Date of incorporation/qualification: May 24, 1996 Document number: P96000044862 |
| 4. The name and address of the current registered agent and office: |
| Aichard G. Carrett Lorpitation Service Company |
| |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board. (Signature of an officer, chairman or vice chairman of the board) May 10, 2000 (Date) |
| Burton A. Honig, Vice President |
| (Printed or typed name and title) Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. |
| Siaa R. Panstarshen 10 may 2006 |
| (Signature of Registered Agent) (Date) |
| (Typed or Printed Name) (Capacity) |
| * * * FILING FEE: \$35.00 * * * |

CR2E045(7/97)