

PH7600065554

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

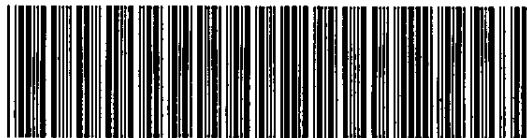
(Business Entity Name)

(Document Number)

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2016 MAY -2 P 2:26

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAY 04 2016

T. LEMIEUX

*Handwritten signature*

**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, this statement of change is submitted for a corporation organized under the laws of the State of FL in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: ADVENTOUS, INC.
2. The principal office address: 12058 MIRAMAR PARKWAY MIRAMAR FL 33025
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 07/28/1997 Document number: P97000065554
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

PARACORP INCORPORATED

155 OFFICE PLAZA DRIVE

TALLAHASSEE

FL 32301

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Service Company

1201 Hays Street

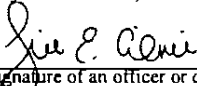
P.O. Box NOT acceptable

Tallahassee

FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Jill Cilmi

Vice President

Printed or typed name and title

*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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.*

**Corporation Service Company**

By:   
Signature of Registered Agent

04/22/2016

Date

If signing on behalf of an entity:

Lindsey M. Lockard, Asst. Vice President

Typed or Printed Name

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

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

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Jill E. Cilmi  
Signature of an officer or director

Jill Cilmi

Printed or typed name and title

Vice President

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**Corporation Service Company**

By: Lindsey M. Lockard  
Signature of Registered Agent

04/22/2016

Date

If signing on behalf of an entity:

Lindsey M. Lockard, Asst. Vice President

Typed or Printed Name

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