P9800059442

| (Re | questor's Name) | | | |
|-------------------------|-------------------|-------------|--|--|
| (Ad | dress) | | | |
| (Ad | dress) | | | |
| (Cit | y/State/Zip/Phon | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Bu: | siness Entity Nar | me) | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to | Filing Officer: | | | |
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DEPARTMENT OF STATE DIVISION OF CORPORATIONS
2011 NAY 25 AN II: 04

ZOIL HAY 25 PH 2: N SECRETARY OF STATE TALL AHASSEE, FLORID



| IN SERVICE COMPANY. | | | | | |
|---------------------|------------------|------|----------|-------------|--|
| | ACCOUNT NO. | : | 12000000 | 00195 | |
| | REFERENCE | : | 745655 | 7136198 | |
| | AUTHORIZATION | : | | | |
| | COST LIMIT | | \$ 35.00 | Spullelenan | |
| ORDER DATE : 2 | | | | | |
| ORDER TIME : | 9:06 AM | | | | |
| ORDER NO. : | 745655-010 | | | | |
| CUSTOMER NO: | 7136198 | | | | |
| | • • • | | | | |
| CHANGE OF AGENT | | | | | |
| | | | | | |
| NAME: | AV MARKETPLACE | ₹. 3 | INC - | | |
| | | -, - | | | |
| | | | | | |
| PLEASE RETURN T | THE FOLLOWING AS | PRO | OF OF FI | LING: | |
| CERTIFI PLAIN S | | | | | |
| | | | | | |
| | | | | | |
| CONTACT PERSON: | Jeanine Reynol | .ds | EXT# | 2933 | |
| | | | EXAMINER | : | |

$\ensuremath{\mathcal{S}}$ Tatement of change of registered office or registered agent or both for corporations

| statement of ch | the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of Florida rder to change its registered office or registered agent, or both, in the State of Florida. | |
|---|--|---------|
| 1. The name of | of the corporation: AV MARKETPLACE, INC. | |
| 2. The principa | pal office address: 6301 Benjamin Road, Suite 101, Tampa FL 33634 | |
| 3. The mailing | g address (if different): | <u></u> |
| 4. Date of incom | corporation/qualification: 07/06/1998 Document number: P98000059442 | |
| | and street address of the current registered agent and registered office on file with the partment of State: | |
| | NRAI Sérvices, Inc. | |
| | 515 E. Park Avenue | |
| | Tallahassee FL 32301 | |
| 6. The name an (if changed): | Tallahassee FL 32301 Tallahassee FL 32301 SECRETARY AND TALLAHASSEE TALLAHASSEE | |
| | Corporation Service Company 1201 Hays Street | • |
| | 1201 Hays Street |) _ |
| | (P.O. Box NOT acceptable) | - |
| | Tallahassee, FL 32301 | |
| The street addr as changed wil | drest of its registered office and the street address of the business office of its registered agent. | |
| Such change was | was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. | |
| | Steve Benjamin EV | |
| I hereby accept I further agree of my duties, and document is be corporation ha | ept the appointment as registered agent and agree to act in this capacity, see to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this being filed merely to reflect a change in the registered office address, I hereby confirm that the has been notified in writing of this change. | |
| Bv: 🗢 | 06-23-2011 | |
| | Signature (Registered Agent) (Date) behalf of an entity: | |
| 0 5 | opet, Asst. VP | |
| | (Typed or Printed Name) | |
| | * * * FILING FFF: \$35.00 * * * | |

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

CR2E045 (8:05)