P98000088400

(Requestor's Name)				
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PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Charge

DEPARTMENT OF STATE

FILED 2012 JM-4 PH 3-15 TALLAHASSEE FLONIE

K/S/18



ACCOUNT NO. : I2000000195				
REFERENCE : 034361 7426667				
AUTHORIZATION : THE REAL PROPERTY OF THE PROPE				
COST LIMIT : \$ 35.00				
ORDER DATE: December 21, 2011				
ORDER TIME : 11:53 AM				
ORDER NO. : 034361-001				
CUSTOMER NO: 7426667				
CHANGE OF AGENT				
NAME: AMC HOLDING, INC.				
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:				
CERTIFIED COPY XX PLAIN STAMPED COPY				
CONTACT PERSON: Troy Todd EXT# 2940				
EXAMINER:				

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

statement of cha	provisions of sections 607.0502, 617.050 ange is submitted for a corporation organ er to change its registered office or regist	nized under the laws of the State of Flo	orida
1. The name of	the corporation: AMC HOLDING, IN	NC.	··· ·-
2. The principal			
3. The mailing a	address (if different):		
4. Date of incorp	poration/qualification: 10/16/1998	Document number: P980000)88400
	d street address of the current registered a street of State:	agent and registered office on file with t	the
	CT Corporation System		
	1200 South Pine Island Road		que
	Plantation, FL 33324	<u>.</u>	2012 SE
6. The name and (if changed):	d street address of the new registered age	nt (if changed) and /or registered office	SECRETAR
	Corporation Service Company	<u>y</u>	
	1201 Hays Street		
	(P.O. Box NOT acceptable	;)	De a
	Tallahassee, FL 32301		
The street addre as changed will	ess of its registered office and the street be identical.	address of the business office of its re	egistered agent,
Such change wa authorized by th	as authorized by resolution duly adopte ne board, or the corporation has been no	d by its board of directors or by an of otified in writing of the change.	ficer so
My (Signati	under Caffelf are of an officer or director)	Maureen Cathell, Vice Pres	
of my duties, an document is bei corporation has	the appointment as registered agent are to comply with the provisions of all stated I am familiar with and accept the objugited merely to reflect a change in the speed of this change in the composition of the change of the cha	nd agree to act in this capacity. tutes relative to the proper and compl ligation of my position as registered a he registered office address, I hereby o 2.	ete performance igent. Or, if this confirm that the
Corporal	tion Service Company	December 20, 2011	
& (Sig	gature of Registered Agent)	(Date)	
lf signing on be	half of an entity:		
Sylvia Quep	opet, Asst. VP		
(7)	Гуреd or Printed Name)		

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

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