| (Requestor's Name)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
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2013 MAR -4 AM 9: 51

MAR' 0'5 2013/ T. LEMIEUX



| TION SERVICE COMPANY.                           |  |  |  |  |
|---|--|--|--|--|
| ACCOUNT NO. : 12000000195                       |  |  |  |  |
| REFERENCE : 547543 7360359                      |  |  |  |  |
| AUTHORIZATION: Similar Coman                    |  |  |  |  |
| COST LIMIT : \$ 35.00.                          |  |  |  |  |
| ORDER DATE : February 26, 2013                  |  |  |  |  |
| ORDER TIME : 1:27 PM                            |  |  |  |  |
| ORDER NO. : 547543-005                          |  |  |  |  |
| CUSTOMER NO: 7360359                            |  |  |  |  |
|   |  |  |  |  |
| CHANGE OF AGENT                                 |  |  |  |  |
|   |  |  |  |  |
| NAME: SILVER LINING LEASING, INC.               |  |  |  |  |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |  |  |  |  |
| CERTIFIED COPY  XX PLAIN STAMPED COPY           |  |  |  |  |
| CONTACT PERSON: Susie Knight EXT# 52956         |  |  |  |  |
| EXAMINER:                                       |  |  |  |  |

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

| statement of change is:   | submitted for a corporation organ   | 92, 607.1508, or 617.1508, Florida Statu<br>nized under the laws of the State of <mark>Flor</mark><br>tered agent, or both, in the State of Floric | ida                                   |  |
|---|---|--|---------------------------------------|--|
|   | poration: SILVER LINING LE  | _  |                                       |  |
| 2. The principal office   | address: 510 James River Ro   | oad, Gulf Breeze FL 32561  |                                       |  |
| 3. The mailing address  | (if different): PO Box 487, Gu  | ulf Breeze FL 32562  |                                       |  |
| 4. Date of incorporation  | n/qualification: 08/10/1999   | Document number: P99000070   | 0860                                  |  |
|   | address of the current registered a<br>of State: (If resigned, enter resign   | agent and registered office on file with the   | 2013 MAR -4<br>SECRETARY<br>TALLAHASS |  |
| Jesm  | nonth, Richard E.   |  | 野                                     |  |
| 200 \$  | S. Tarragona St.  |  | RY OF                                 |  |
| Pens  | acola FL 32502  |  | 57/<br>FLO                            |  |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |   |  |                                       |  |
| Corp  | oration Service Company   |  |                                       |  |
| 1201  | Hays Street   |  |                                       |  |
| P O. Box NOT acceptable   |   |  |                                       |  |
| Talla   | hassee, FL 32301  |  |                                       |  |
| The street address of it as changed will be iden  | ts registered office and the street<br>ntical.  | address of the business office of its reg  | gistered agent,                       |  |
| Such change was authorized by the boar  | orized by resolution duly adopted<br>d, or the corporation has been no  | d by its board of directors or by an offic<br>patified in writing of the change.   | er so                                 |  |
| Leb   | leeves  | Deb Reeves, VP   |                                       |  |
| Signature of an o   |   | Printed or typed name and title  | <del>-</del>                          |  |
| I further agree to comperformance of my dutagent. Or, if this document that the Corporation Set                 | ties, and I am familiar with and a<br>ment is being filed merely to ref<br>e corporation has been notified i<br>rvice Company | tutes relative to the proper and complete<br>accept the obligation of my position as t<br>lect a change in the registered office ad                | registered                            |  |
| By: Sarah W   | 1   | 2/26/2013  |                                       |  |
|   | Registered Agent  | L)ate  |                                       |  |
| If signing on behalf of   | an entity:  |  |                                       |  |
| Sarah Wright, Ass   | t. VP   |  |                                       |  |
| Typed or P  | Onted Name  |  |                                       |  |

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