



OFFICE OF SECRETARY OF STATE
CORPORATIONS DIVISION
2 Martin Luther King Jr. Dr. SE
Suite 313 West Tower
Atlanta, Georgia 30334
(404) 656-2817

SECRETARY OF STATE
CORPORATIONS DIVISION

2017 MAY 11
PH

Brian P. Kemp
Secretary of State

STATEMENT OF CHANGE OF ADDRESS
OF REGISTERED OFFICE

Note: This form is to be used only for changing the address of a registered office, and is not to be used for changing the registered agent on file with the Secretary of State for an entity. The filing fee is \$5.00 per entity, with a minimum fee of \$25.00.

The undersigned registered agent submits this statement for the purpose of changing the address of the registered office for the entity listed below or the entities listed on an attachment to this statement:

1. Name of Registered Agent: National Registered Agents, Inc.

2. Entity Information: Multiple entities are involved with this change of address. A typed list of the entity names in alphabetical order, control numbers, and entity types are attached.

Entity Name: _____

Entity Control Number: _____

Entity Type (check one only):

Domestic Corporation (Profit, Nonprofit, or Professional) Foreign Corporation (Profit, Nonprofit, or Professional)
 Domestic Limited Liability Company Foreign Limited Liability Company
 Domestic Limited Partnership/Limited Liability Limited Partnership Foreign LP/LLP
 Foreign Limited Liability Partnership

3. Current street address and county of registered office:

Address: 1201 Peachtree St. N.E. _____

City: Atlanta _____ County: Fulton _____ State: GA Zip Code: 30361 _____

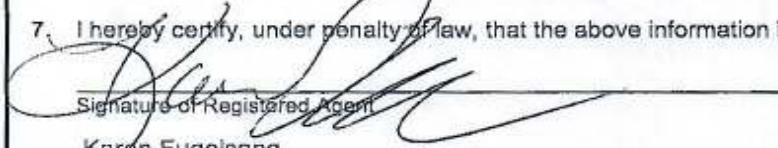
4. New street address and county of registered office: email address: FFInboxATL@wolterskluwer.com
Address: 289 S Culver St _____

City: Lawrenceville _____ County: Gwinnett _____ State: GA Zip Code: 30046-4805 _____

5. The address of the entity's registered office and the business address of the registered agent, as changed, will be identical.

6. Statement of notification: The undersigned certifies that written notice of the registered agent's change of address or a copy of this statement has been delivered or mailed to the above-named entity in accordance with the applicable provisions of the Official Code of Georgia Annotated.

7. I hereby certify, under penalty of law, that the above information is true and correct.


Signature of Registered Agent
Karen Fugelsang
Print Name

4/26/2017
Date
Asst. Secy.
Title (if signing for an entity)