

203000009973

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

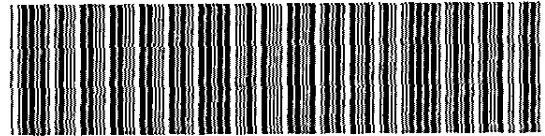
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

AK

Office Use Only



800040350958

FILED
04 AUG 31 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
04 AUG 31 AM 10:19
DEPARTMENT OF STATE
INVESTIGATIONS
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 867330 7137842

AUTHORIZATION : *Patricia Pijet*

COST LIMIT : \$ 25.00

FILED
04 AUG 31 PM 1:34
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : August 30, 2004

ORDER TIME : 9:57 AM

ORDER NO. : 867330-005

CUSTOMER NO: 7137842

CUSTOMER: James E. Toups
East Coast Fire Protection,
Suite 1100
3017 Vernon Road
Richmond, VA 23228

CHANGE OF AGENT

NAME: SOUTHEAST FIRE PROTECTION,
LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY

CONTACT PERSON: Troy Todd -- EXT# 2940

EXAMINER: _____

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

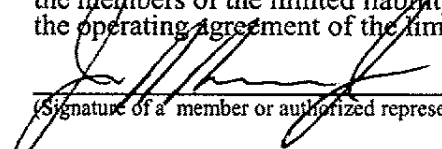
1. The name of the limited liability company is: SOUTHEAST FIRE PROTECTION, LLC
2. The mailing address of the limited liability company is : 255 South Orange Avenue, Suite 800, Orlando FL 32801
3. Date of filing/registration in Florida March 18, 2003
4. Document number L03000009973
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
AUG 31 PM 1:31
FILED

John P. Greeley
Name
255 South Orange Avenue, Suite 800
Address
Orlando, FL 32801
City, State and Zip


6. The name and address of the new registered agent and/or office:
Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.



(Signature of a member or authorized representative of a member)
James R. Burkett, Jr., Manager
(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



(Signature of Registered Agent) Marva L. Williams, Assistant Vice President

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314