

Division of Corporations

# LO3000028220

Page 1 of 1

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
 Fax Number : (850) 617-6380

From: Account Name : C T CORPORATION SYSTEM  
 Account Number : FCA000000023  
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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. Name of the limited liability company: FCC, L.L.C.
2. (a) Principal office address of limited liability company: 515 N FLAGLER DR, STE 700 WEST PALM BEACH FL 33401
(b) Mailing address of limited liability company: 515 N FLAGLER DR, STE 700 WEST PALM BEACH FL 33401

07/31/2003 3. Date of filing/registration in Florida LD3000028220 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State
Registered Agent: SUNSHINE MARK A
Registered Office Address: 515 N FLAGLER DRIVE SUITE 700 WEST PALM BEACH FL 33401 US

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:
NEW Registered Agent: C T Corporation System
NEW Registered Office Address: 1200 South Pine Island Road Plantation, FL 33324

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.

Miriam Greenhut (Signature of a member or authorized representative of a member)

Miriam Greenhut (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.

By: Barbara A. Burke, C T Corporation System, Special Assistant Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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