

M01000000865

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

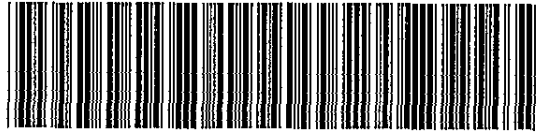
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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03 MAR 10 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK



March 6, 2003

Florida Department of State
Division of Corporations
409 East Gaines Street
Tallahassee FL 32399

Re: Summerville Management, LLC
M01000000865

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dear Sir/Madam:

Enclosed please find a Statement of Change of Registered Office & Registered Agent on behalf of the above-referenced entity. Also enclosed is our check for \$25.00 in payment of the necessary filing fee.

Kindly file the enclosed as soon as possible and return evidence of filing to the undersigned at your earliest convenience.

Please do not hesitate to contact our office with questions or comments. Thank you.

Very truly yours,

HIQ CORPORATE SERVICES, INC.

A handwritten signature in black ink, appearing to read 'James C. Strott, Jr.', written over a horizontal line.

James C. Strott, Jr.

Enclosures
JCS/lw

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: SUMMERVILLE MANAGEMENT, LLC
2. The mailing address of the limited liability company is : _____
3000 EXECUTIVE PARKWAY SUITE 530 SAN RAMON CA 94583
3. Date of filing/registration in Florida 04/18/2001 4. Document number M0100000865

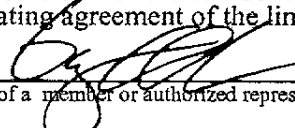
5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

CT CORPORATION SYSTEM
Name
1200 SOUTH PINE ISLAND ROAD
Address
PLANTATION FL 33324
City, State and Zip

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TALLAHASSEE, FLORIDA

6. The name and address of the new registered agent and/or office:
- HIQ CORPORATE SERVICES, INC.
Name
526 EAST PARK AVENUE SUITE 200
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.

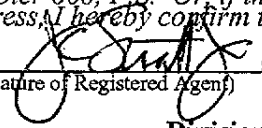


(Signature of a member or authorized representative of a member)

GRANGER COBB

(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.

 PRES for HIQ CORPORATE SERVICES, INC.

(Signature of Registered Agent)

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