## MOLOWODOUSI

(Reques	stor's Name)				
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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

BK 12/7



ACCOUNT N	NO. : 072100000032				
REFEREN	NCE : 349982 4340120				
AUTHORIZATI	ION: Smellelena				
COST LIM	AIT : \$ 25.00				
ORDER DATE : December 7, 2	3007				
ORDER TIME: 10:09 AM	Dr.				
ORDER NO. : 349982-010					
CUSTOMER NO: 4340120					
CHANGE OF AGENT					
NAME: PROPULSION INTERNATIO	TECHNOLOGIES DNAL, LLC				
PLEASE RETURN THE FOLLOWING	G AS PROOF OF FILING:				
CERTIFIED COPY  XX PLAIN STAMPED COPY					
CONTACT PERSON: Susie Knig					
	EXAMINER'S INITIALS:				

## 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 limite	d liability company	is: <u>Propulsic</u>	on Technologies In	ternational, LLC	
2. The mailing address of	f the limited liability	company is : _	8050 N.W. 31st S	treet	
Miami, FL 33122		- <del></del>		<del> </del>	
May 21, 2001 3. Date of filing/registration	ion in Florida		M01000001131 4. Document number	TC CONTRACTOR OF THE CONTRACTO	
5. The name of the register Florida Department of S	ered agent and the rep State:	gistered office	address as shown on	the records of the	
·	Ste	ven Silverma Name	<u> </u>		
9500 S. Dadeland Blvd. Suite 500 Address					
	Mia Cit	mi, FL 331 y, State and Zi	<u>56</u>	OTT SEE	
6. The name and address of the new registered agent and/or office:					
	Corporation	on Service Co Name	ompany	DEC -7 PH 3: 43 LECRETARY OF SIAT	
		1 Hays Street		E.F.	
	Florida street addic	ess (P.O. Box f	NOT acceptable)	9. <b>5</b>	
	<u>Tallahassee</u>	FL State and Zip	32301	- Ori	
If the limited liability com confirmed that after the ch and the business office of liability company, it is her of the members of the lim or the operating agreement (Signature of a member or authority)	pany is not organize lange or changes are the registered agent eby confirmed that the lited liability compart of the limited liability.	d under the lav made, the Flor will be identica he change(s) w ny or as otherw ity company.	ida street address of tal. Or, in the case of the large street of the case of the large street by the large street of the larg	the registered office a Florida limited y an affirmative vote	
RICHARD LAU (Printed or typed name of signee)	ick Ner				
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 508, F.S. Or, if the address I hereby confirm	ntment as registered sof all statutes relation accept the obligation is document is being that the limited keep	agent and agrive to the prope ons of my posite of filed to merel of the sagent its agent	ee to act in this capac er and complete perfo on as registered ager y reflect a change in as been notified in wi	sity. I further agree to ormance of my duties, of as provided for in the registered office riting of this change.	

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

INHS18 (8/05)