## Florida Department of State

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## REGISTERED AGENT CHANGE

## GYROCAM SYSTEMS LLC

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DEC 2 4 2008

EXAMINE

12/23/2008

December 23, 2008

FLORIDA DEPARTMENT OF STATE
Davision of Corporations

GYROCAM SYSTEMS LLC 7345 16TH ST EAST BLDG C SUITE 101 SARASOTA, FL 34243

SUBJECT: GYROCAM SYSTEMS LLC

REF: M03000001940

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Marsha Thomas Regulatory Specialist II FAX Aud. #: H08000278306 Letter Number: 008A00061386 08 DEC 22 AM 9: 24

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR NOTH 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.

in the state of rioriaa.		
1. Name of the limited liability company: GyroCarr	n Systems LLC	
2. (a) Principal office address of limited liability comp (Note: MUST RE STREET ADDRESS)	Building C, Suite 101	2
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	Sarasota Florida 34243  7345 16th Street, East Building C, Suite 101 Sarasota, Florida 34243	777
June 16, 2003	MO3000001940 D	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown		
Registered Agent:	David M. Boggs, Esq.	
Registered Office Address:	Macfarlane Ferguson & McMullen 201 N. Franklin Street, Ste. 2000 Tampa, FL 33602	
(b) Enter name of <u>NEW Registered Agent</u> and/or I	NEW Registered Office address:	
NEW Registered Agent:	Doug Wildht	
<u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	7345 16th Street, East Bullding C, Suite 101 Sarasota ,FL 34243	
If the limited liability company is not organized under that after the change or changes are made, the Florida so office of the registered agent will be identical. Or, in the hereby confirmed that the change(s) was were authorized liability company or as otherwise provided in the article limited liability company.  (Signature of a himber or applicated representative of a member)	treet address of the registered office and the business to ease of a Florida limited liability company, it is ed by an affirmative vote of the members of the limited	
Doug Wright (Printed or typed name of signer)	<del>-</del> -	
	and agree to act in this capacity. I further agree to se proper and complete performance of my duties, and I ution as registered agent as provided for in Chapter 608, act a change in the registered office address, I hereby villed in writing of this change.	
(Signature of Registrated Agent)  Doug Wright Division of Corporations, P.O.  WILING	Box 6327, Tajinhassee, FL 32314	

INH\$18 (05/08)