200001512

ACCOUNT NO. : 072100000032

REFERENCE : 977636

5167317

AUTHORIZATION :

COST LIMIT : \$ 25.00

ORDER DATE: October 16, 2001

ORDER TIME : 9:43 AM

ORDER NO. : 977636-085

CUSTOMER NO:

5167317

CUSTOMER: Ms. Colleen Darling

The Clark Construction Group 7500 Old Georgetown Road

Bethesda, MD 20814

000004640950-

CHANGE OF AGENT

NAME: 14261 ASSOCIATES LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY

PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon -- EXT# 1145

EXAMINER:

01 0CT 18 AM IC: 29

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TIVER HEALT OF STATE

BECEINED

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	s: 14261 A	SSOCIATES LLC			
2. The mailing address of t	he limited liability o	company is :	7500 Old George	town Roa	<u>ad, 15th</u>	<u>Flo</u> or
Bethesda, MD 20814.						•
11 /05 /1000						
11/05/1999 L99000007512					- 1-1-4	
3. Date of filing/registration	n in Florida		4. Document num	per		
5. The name of the registere Florida Department of St	ed agent and the reg	istered office	address as shown or	the recor	rds of the	
	C T Corporation System					
Name						
1200 South Pine Island Road						
Address						
						_
Plantation, FL 33324 City, State and Zip						<u> </u>
					3 at 170 a	3
6. The name and address of the new registered agent and/or office:						
_	Corporatio	n Service	Company		; 	<u></u>
	Name				7:	
	1201 Hays Street					
	Florida street address (P.O. Box NOT acceptable)				12 (12) 12 (12) 13 (12)	
	Tallahassee	FL	32301	-		
-		State and Zi		- -		
If the limited liability compaconfirmed that after the char and the business office of th liability company, it is herel the members of the limited I the operating agreement of t	nge or changes are r the registered agent was the confirmed that the	nade, the Flo vill be idention e change(s)	orida street address of cal. Or, in the case of was/were authorized.	the regist a Florida	tered office limited	ote of
(Signature of a member or authorized	I representative of a memb	per)				
see at	tached					
(Printed or typed name of signee)				- '		
I hereby accept the appoints comply with the provisions of and I am familiar with and o Chapter 608, F.S. Or, if this address, I hereby confirm th	ment as registered a of all statutes relativ iccept the obligation of document is being at the limited liabili	igent and ag ve to the prop ns of my pos filed to mer ity company	ree to act in this capo per and complete per tion as registered ag gly reflect a change i has been notified in v	icity. I fur formance ent as pro in the regin vriting of	rther agre of my dut vided for stered offi this chan	ze to ties, in ice ge.
(Signature of Registered Agent) Car						
(premarate of vestigueren vestif) CS3	rol K. Dolor, As.	st. V.P.				

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

INHS18(10/99)

FILING FEE: \$25.00

14261 ASSOCIATES LLC

By: CEI Realty, Inc., Manager

> <u>Jelvial S. Ownacher</u> Deborah Ohlmacher, Authorized Individual By:

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