9000000

ACCOUNT NO. : 072100000032

REFERENCE :

COST LIMIT :

977636

AUTHORIZATION

\$ 25.00

ORDER DATE: October 16, 2001

ORDER TIME : 9:40 AM

ORDER NO. : 977636-075

CUSTOMER NO: 5167317

CUSTOMER: Ms. Colleen Darling

The Clark Construction Group

7500 Old Georgetown Road

700004640947--3

Bethesda, MD 20814

CHANGE OF AGENT

NAME: TRIO INDUSTRIAL LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY ___ PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon -- EXT# 1145

TAT LAHASSEE, FLORIDA SHITTAROGAZO TO HOLEXAMINES: STATE OF STATE

01 0CT 18 AM 10: 29

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 limite	d liability company is	S: TRIO IND	USTRIAL LLC		· · ·	<u>.</u> •
2. The mailing address of	the limited liability	company is :	7500 Old George	town Road, 15	th Flo	or,
Bethesda, MD 20814						
						_ ** ∀# :
11/05/1999		_ : .	L99000007505			: ₌. ÷
3. Date of filing/registrati	on in Florida		4. Document numl	per	b .	
5. The name of the register Florida Department of S	red agent and the reg State:	istered office	address as shown or	the records of t	he	
	C T Con	rporation S	ystem		.77 8.0	
	-	Name	· · · · · · · · · · · · · · · · · · ·			
	1200 Sout	h Pine Isla	nd Road			
		Address		•	*	•
		tion, FL 3			-	
	City	, State and Zi	p	- · · · · · ·	~ · ·	
6. The name and address of the new registered agent and/or office:					01 O	
	Corporation	on Service	Company			
		Name		5) <u>1</u>	ිකි	
_	1201	Hays Street	; ,	25 m		
	Florida street addre	ss (P.O. Box)	NOT acceptable)	問 ら 		ings
	Tallahassee	FL	32301		』 13	
	City,	State and Zip				
If the limited liability components that after the chand the business office of a liability company, it is here the members of the limited the operating agreement of	ange or changes are r the registered agent w eby confirmed that th I liability company or	nade, the Flor vill be identicate the change(s) we as otherwise	ida street address of al. Or, in the case of as/were authorized	the registered of a Florida limite by an affirmative	ffice d	f
(Signature of a member or authoriz	zed representative of a mem	ber)	**1			. A. E J
See a (Printed or typed name of signee)	ttached			-	- -	==.
I hereby accept the appoir comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if th address, I hereby confirm	ntment as registered of s of all statutes relative di accept the obligation his document is being that the limited liabil	agent and agr ve to the prop ns of my posit filed to mere ity company h	ee to act in this cape er and complete per ion as registered ag ly reflect a change i as been notified in v	icity. I further a formance of my ent as provided n the registered vriting of this ch	igree to duties, for in office iange.	
(Signature of Registered Agent) Co	V Dol -	-	.		·	-
Division	a of Corporations, P	O. Box 6327	. Tallahassee, FL	32314		

resion of Corporations, 1.0. Dox 0327, Tananassee, FL 3.

FILING FEE: \$25.00

INHS18(10/99)

TRIO INDUSTRIAL LLC

By: CEI Realty, Inc., Manager

> Actoral S. Outmacles
> Deborah Ohlmacher, Authorized Individual By: