

**A0800000742**  
Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
Fax Number : (850) 617-6380

**From:**

Account Name : TRIAD PROFESSIONAL SERVICES, LLC  
Account Number : I20020000094  
Phone : (770) 777-2091  
Fax Number : (770) 220-1943

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### REGISTERED AGENT CHANGE

STERLING/BROCK TITUSVILLE, LLLP

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**LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP  
STATEMENT OF CHANGE OF REGISTERED OFFICE OR  
REGISTERED AGENT, OR BOTH**

Pursuant to the provisions of section 620.1115, Florida Statutes, the undersigned limited partnership or limited liability limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

**1. STERLING/BROCK TITUSVILLE, LLLP**

Name of Limited Partnership or Limited Liability Limited Partnership

**2. 08/08/2008**

Date of filing/registration in Florida

**3. A08000000742**

Florida document number

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

BROCK, PETER

Name

450 DONALD ROSS ROAD, SUITE 200

Address

PALM BEACH GARDENS FL 33418

City, State and Zip

5. The name and Florida street address of the new registered agent and/or office:

NRAI Services, Inc.

Name

2731 Executive Park Drive, Suite 4

Florida street address (P.O. Box not acceptable)

Weston

FL 33331

City, State and Zip

6. Such change(s) is/are effective when filed by the Florida Department of State.

/s/Robert S. Green

Signature of General Partner

*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 an accept the obligations of my position as registered agent.*

NRAI Services, Inc.

by Mary Paris

Signature of Registered Agent

Mary Paris, Assistant Secretary

Filing Fee: \$35.00

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