COLLER ENTERPRISES, LTD.  FILED  O1 MAR 29 AM 11: 12  SECRETARY OF STATE TALLAMISSEE, FLORIDA  WALES R, 54(0)  WALES R, 54(0)  SURE, ACR, W, etc.  City & State  City & St	DOCUMENT # A9800002832				0			
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Zip Country Zip Country S. Certificate of Status Desired Set	Suite, Apt. #, etc. Suite, Apt. #, etc.			<del></del>	DO NOT WRITE IN THIS SPACE			
S. Name and Address of Current Registered Agent  T. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  Street Address (P.O. Box Number is Not Acceptable)  City  FL  Zip Code  The above named entity submits this statement for the purpose of changing its registered dgent or to the State of Florida.  SIGNATURE  Street Address (P.O. Box Number is Not Acceptable)  Signature to the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  Street Address (P.O. Box Number is Not Acceptable)  DNIC  SIGNATURE  Street Address (P.O. Box Number is Not Acceptable)  DNIC  In the State of Florida.  SIGNATURE  Signature to a common and address of Number is Not Acceptable)  DNIC  In the State of Florida.  SIGNATURE  Signature to a common and address of Number is Not Acceptable)  DNIC  SIGNATURE  SIGNATU	City & State City & State		City & State		4. FEI Number			
RLORA, TERRY L 3003 TAMAMI TRAIL NORTH, SUITE 400  NAPLES FL 34103  City FL Zip Code  8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  9. Capital Contributions as \$10,000,000.00  10. Amount of Capital Contributions in FLORIDA to daile. \$10,000,000.00  11. MAKE CHECK PAYABLE TO DEPT. OF STATE SE NOTE: SET NOT	Zip	Country	Ζiρ	Country	5. Certificate of	of Status Desired	\$8.75 Additional Fee Required	
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3. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.  SIGNATURE  9. Capital Contributions so Shown on record 9. Capital Contributions on February 10. Amount of Capital Contributions on February 10. Amount of Capital Contributions on February 10. A GENERAL PARTITION 11.0 A DEVICE SERVERS SERVICE TO DEPT. OF STATE SER REVERSE SERVERS. SIDE FOR FEE IMPORTATION 12. ADDRESS CHANGES ONLY  12. GENERAL PARTITION INFORMATION 13. ADDRESS CHANGES ONLY  12. GENERAL PARTITION INFORMATION 13. ADDRESS CHANGES ONLY  13. ADDRESS CHANGES ONLY  14. Capital Contributions on the first of the first of the first address of the firs	·							
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		ertify that the information supplied with t	<u> </u>		Florida Statutos I further co	rtify that the information		

indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE:

Terry L. Flora, VP 3/23/6/

941/261-4455 Daytime Phone #