

Booooooooo!!

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

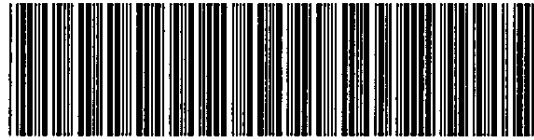
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DEC 7 4 2006

COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: E.J. Breneman, L.P.

(Name of Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: B00000000071

The enclosed Statement of Change of Registered Office and/or Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Angela Gawlinski

(Contact Person)

Premier Corporate Services, Inc.

(Firm/Company)

200 West Adams, Suite 2007

(Address)

Chicago, IL 60606

(City, State and Zip Code)

For further information concerning this matter, please call:

Angela Gawlinski

(Name of Contact Person)

at (312) 346-3606

(Area Code and Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Florida Department of State.

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

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

INHS04 (01/06)

**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. E.J. Breneman, L.P.

Name of Limited Partnership or Limited Liability Limited Partnership

2. 3/15/00

Date of filing/registration in Florida

3. B00000000071

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:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, FL 33324

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.

Philip D. Wagner
Philip D. Wagner, President

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 and accept the obligations of my position as registered agent.

NRAI Services, Inc.

by: Philip D. Wagner

Signature of Registered Agent

Philip D. Wagner Co, LLC, General Partner
on behalf of:
E.J. Breneman

Filing Fee: \$35.00

Certified Copy (optional): \$52.50

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