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TALLAMASSES FOR ORIDA

05 JAN 12 PH 12: 4:



ACCOUNT NO. : 072100000032

REFERENCE: 133636 4356039

AUTHORIZATION : ,

COST LIMIT :

ORDER DATE: January 10, 2005

ORDER TIME : 10:51 AM

ORDER NO. : 133636-055

CUSTOMER NO: 4356039

CUSTOMER: Mr. Gary Hart

Deloitte & Touche 4022 Sells Drive

Hermitage, TN 37076-2930

CHANGE OF AGENT

NAME: DELOITTE SERVICES LP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Sara Lea

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

Pursuant to the provisions of sections 620.105 and 620.1051, Florida Statutes, the undersigned limited partnership submits the following statement in order to change its registered office or registered agent, or both, in the state of Florida.

1. DELOITTE SERVICES LP		
Name of the limited partnership		
2. 12/28/2000 3.B0	000000398	
Date of filing/registration in Florida	Document number assigned	
	2	
A. The name of the registered agent and the registere	d office address as shown on the records of the Florida	
• • •	torrice address as shown on the records of the riorida	
Department of State:	_	
C T Corporation System Name		
17		
1200 South Pine Island	Road E. S.	
Add		
	를 보 는 그	
Plantation, FL 33324	TAHASSEE, FILE L	
City, St	ate and Zip	
•	- 2 円型 2 に	
5. The name and address of the new registered agent	and/or office:	
	2 2	
Corporation Service Company		
N	ame	
4004		
1201 Hays Street		
Florida street address (P.O. Box not acceptable)		
en 11-h	TII 20201	
Tallahassee	FL 32301	
City, State and Zip 6. Such change(s) was/were authorized by the general partners.		
o. Such change(s) was/were authorized by the general		
Δ .	Barbara S. Newman, General Partner of	
\mathcal{R}_{α} \mathbb{A} \mathbb{A}	Deloitte & Touche USA LLP member of	
1 Jawa 1 V Norm	D&T Services GP LLC, General Partner of	
Signature of General Partner	Deloitte Services LP	
Therefore a second discount of the second of	. I care to get in this canacity. I further gave to somely	
I hereby accept the appointment as registered agent are with the provisions of all statutes relative to the pro-	ed agree to act in this capacity. I further agree to comply per and complete performance of my duties, and I am	
familiar with and accept the obligations of my position	i as registered agent. Or, if this document is being filed	
merely to reflect a change in the registered office ad	dress, I hereby confirm that the limited partnership has	
been notified in writing of this change.	arous, I heroby congrim what the victional partitioning has	
Corporation Service Company		
Th. 11/12		
- Comment	- ·	
Signature of Registered Agent		
Elizabeth A. Dawson, Asst. Vice Preside	at .	

Make checks payable to Florida Department of State and mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 Filing Fee: \$35.00