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(Re	questor's Name)
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ACCOUNT NO. : 072100000032

REFERENCE: 969780 7382243

AUTHORIZATION :

COST LIMIT : \$ 35.00

ORDER DATE: November 12, 2004

ORDER TIME : 10:07 AM

ORDER NO. : 969780-025

CUSTOMER NO: 7382243

CUSTOMER: Ms. Holly N. Bentley

Shumacker Witt Gaither & Suite 1100, Suntrust Bank Building 736 Market Street Chattanooga, TN 37402

CHANGE OF AGENT

NAME: ERMC, L.P.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Justin Cheshire

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.ERMC, L.P. (LIMITED)
Name of the limited partnership
2. February 11, 1993 Date of filing/registration in Florida 3.B93000000063 Document number assigned
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 address of the new registered agent and/or office:
Plantation, FL 33324
City, State and Zip
5. The name and address of the new registered agent and/or office:
Corporation Service Company Name
1201 Hays Street Florida street address (P.O. Box not acceptable)
Tallahassee FL 32301 City, State and Zip
6. Such change(s) was/were authorized by the general partners.
Russell Security Co., Inc., General Partner White Cult
Signature of General Partner Maureen Cullen, Attorney in Fact 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. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the limited partnership has been notified in writing of this change.
Corporation Service Company
Signature of Registered Agent Jennifer A. Geldof, Asst. Vice President

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