

To: +1 (850) 205-3880  
Subject:

From: Cristall Harris

Monday, September 25, 2006 5:26 PM Page: 1 of 2

**F02000004019**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 205-0380

From: Account Name : CORPDIRECT AGENTS, INC.  
Account Number : 110450000714  
Phone : (850) 222-1173  
Fax Number : (850) 224-1640

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

**REGISTERED AGENT CHANGE**

**PEI LICENSING, INC.**

Certificate of Status	0
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Page Count	01
Estimated Charge	\$35.00

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T. Roberts SEP 26 2006

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**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH  
FOR CORPORATIONS**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Delaware in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: PEI Licensing, Inc.
2. The principal office address: 3000 N.W. 107TH AVENUE, ATTN: TAX DEPT, MIAMI FL 33172
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 08/07/2002 Document number: F02000004019
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

B&C CORPORATE SERVICES, INC.

ONE BISCAYNE TOWER, 21ST FL, 2 SOUTH BISCAYNE BLVD

MIAMI FL 33131

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

CorpDirect Agents, Inc.

515 E Park Ave.

(P.O. Box NOT acceptable)

Tallahassee, FL 32301

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

[Signature]  
(Signature of an officer or director)

TIM D'AMBRASIO SUP/CONTROLLER  
(Printed or typed name and title)

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 obligation 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 corporation has been notified in writing of this change.

Cristal K. Harris  
(Signature of Registered Agent)

September 22, 2006  
(Date)

If signing on behalf of an entity:

Cristal K. Harris Asst. Sec.  
(Typed or Printed Name)

\*\*\* FILING FEE: \$35.00 \*\*\*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE  
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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