

Division of Corporations
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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : PARANET CORPORATION SERVICES, INC.

Account Number : I20090000069 Phone : (800)277-9977

Fax Number : (800)815-0477

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: ARIVERA@PARANETLEGAL.COM

REGISTERED AGENT CHANGE STERNE, AGEE & LEACH, INC.

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9,16,10

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

statement of ch	the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this change is submitted for a corporation organized under the laws of the State of DELAWARE rate to change its registered office or registered agent, or both, in the State of Florida.	
1. The name of the corporation: STERNE, AGEE & LEACH, INC. 2. The principal office address: 800 SHADES CREEK PKWY, SUITE 550, BIRMINGHAM, AL 35209		
3. The mailing	g address (if different):	
4. Date of inco	orporation/qualification: 06/05/2003 Document number: F03000002813	
5. The name at	and street address of the current registered agent and registered office on file with the partment of State:	
	CT CORPORATION SYSTEM	
	1200 SOUTH PINE ISLAND ROAD	
	PLANTATION, FL 33324	
6. The name ar (if changed)	PLANTATION, FL 33324 and street address of the new registered agent (if changed) and /or registered office NRAI Services, Inc. 2731 Executive Park Drive, Suite 4 (P.O. Box NOT acceptable)	
	NRAI Services, Inc.	
	2731 Executive Park Drive, Suite 4 (P.O. Box NOT acceptable) Weston, FL 33331	
The street add	dress of its registered office and the street address of the business office of its registered agent, rill be identical.	
Such change v authorized by Willia	was authorized by resolution duly adopted by its board of directors or by an officer so the board, or the corporation has been notified in writing of the change. William K. Holbrook, Secretary/General Counsel (Printed or typed name and title)	
I hereby accept further agree of my duties, a document is be comporation he	pt the appointment as registered agent and agree to act in this capacity, ie to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this peing filed merely to reflect a change in the registered office address, I hereby confirm that the has been notified in writing of this change.	
Dwen	(Signature of Topisitered Agont) 9/02/10 (Date)	
(If signing on b	behalf of an entity:	
	Andrews, Special Asst. Secretary (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
CR2E045 (8/05)