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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : CORPOR

: CORPORATION SERVICE COMPANY

Account Number: I2000000195

: (850) 521-1000

Phone Fax Number

: (850)558-1575

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

- · ·	Address:			
ורבתהא	ANNTEGE.			

BODEC -3 AM B. BO ECKETARY OF STATE TELAHASSEE, PLORIDA

## REGISTERED AGENT CHANGE CYPRESS HOLDINGS, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

RA/ROCH8

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

Pursuant to the statement of ch	e provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, F hange is submitted for a corporation organized under the laws of the Sl	lorida Statutes, this ate of Delaware			
	der to change its registered office or registered agent, or both, in the St				
1. The name of	f the corporation: CYPRESS HOLDINGS, INC.				
2. The principal	al office address: 13901 Sutton Park Drive South, Ste 310	, Jacksonville, FL 32224			
3. The mailing	g address (if different):				
4 Date of incor	prporation/qualification: 01/22/2004 Document number:	F04000000375			
5. The name an	and street address of the current registered agent and registered office or				
·	Gary R Harger	_			
	13901 Sutton Park Drive South, Ste 310				
	Jacksonville, FL 32224	99 27			
6. The name an (if changed):	nd street address of the new registered agent (if changed) and /or regist ):	09 DEC -3 PM 12: 53			
	Corporation Service Company				
	1201 Hays Street				
	(P.O. Box NOT acceptable)	——			
	Tallahassee, FL 32301				
The street addr	tress of its registered office and the street address of the business off ill be identical.	ice of its registered agent.			
Such change w authorized by t	was authorized by resolution duly adopted by its board of directors of the board, or the corporation has been notified in writing of the char	r by an officer so			
	Robert J. Smith EV				
<i>F</i> /	(Printed or typed				
I hereby accept I further agree of my duties, as document is be corporation ha	pt the appointment as registered agent and agree to act in this capace to comply with the provisions of all statutes relative to the proper of and I am familiar with and accept the obligation of my position as reging filed merely to reflect a change in the registered office address, as been notified in writing of this change.  Tation Service Company	ity. und complete performance gistered agent. Or, if this I hereby confirm that the			
	Signature of Registered Agent) (Date)	-09			
	behalf of an entity:				
Sylvia Q	Queppet, Asst. VP				
(	(Typed or Printed Name)				
	* * * FIT INC FFF. 535 00 * * *				

\* \* \* F1LING FEE: \$35.00 \* \* \*

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEB, FL 32314
CR2E045 (8/05)