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## REGISTERED AGENT CHANGE HBC MANAGEMENT SERVICES, INC.

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

	provisions of socilons 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statues, this nge is submitted for a corporation organized under the laws of the State of Hawaii
	r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: HBC Management Services, Inc.
	office address: 325 Chesmut Street, Suite 415
<del></del>	Philadelphia PA 19106
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 08/01/2006 Document number: F06000005067
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	Corporation Service Company
	1201 Hays Street
	Tallahassee FL 32301-2525
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	C T Corporation System
	c/o C T Corporation System, 1200 South Pine Island Road
	P.O. BOX NOT acceptable
	Plantation, Florida 33324
=	ss of its registered office and the street address of the business office of its registered agent, be identical.
Such change was authorized by th	is authorized by resolution duly adopted by its board of directors or by an officer so le board, or the corporation has been notified in writing of the change.
	Gregory A. Blackburn, Asst. Secretary
	e of an officer of director
document is beli corporation has	the appointment as registered agent and agree to act in this capacity. To comply with the provisions of all statutes relative to the proper and complete performance of amiliar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the been notified in writing of this change.
By:	Corporation System  ADJ Dicam  Install of Aggintated Agent  Date  Corporation System  Corporation System
	half of an entity: NN J. WILLIAMS
zaA	istant Vice President  yped 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)