Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

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: CORPDIRECT AGENTS, INC. Account Name

Account Number: 110450000714

Phone

(850)222-1173

Fax Number

: (850)224-1640

OC144B 70423

REGISTERED AGENT CHANGE

CONTINENTAL PINES CORPORATION

| Certificate of Status | 0 |
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H07000164624 3 STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes ange is submitted for a corporation organized under the laws of the State of <u>Nevada</u> or to change its registered office or registered agent, or both, in the State of Florida. | | |
|--|--|---|--|
| 1. The name of | the corporation: Continental Pines Corporation | | |
| | office address: 1800 Valley View Lane, Suite 300, Dallas, TX 75234 | | |
| 3. The mailing o | nddress (if different): | | _ |
| 4. Date of incor | poration/qualification: 4/2/1996 Document number: F9600000 | 1658 | |
| | d street address of the current registered agent and registered office on file with the rtment of State: | | · |
| | CT Corporation System | | in the state |
| | 1200 South Pine Island Road (1910) (1949) | 07 ALL | 17:50 |
| | Plantation, FL 33324 | JUN 22 | 2art.3 |
| 6. The name and (if changed): | d street address of the new registered agent (if changed) and /or registered office | | E 2 8 2 1 1 1 |
| | NRAI Services, Inc. | 22.5 22.5 20.5 | NAME: |
| | 2731 Executive Park Drive, Suite 4 | 19 19 | 27.11程. |
| | Weston, FL 33331 | -, | Madio |
| The street addr | ess of its registered office and the street address of the business office of its regis | stered agent. | The state of the s |
| Such change wanthorized by the | as authorized by resolution duly adopted by its board of directors or by an office the board, or the corporation has been notified in writing of the change. | | . • |
| (Signal | Sabrina Tillapaugh, Vice Presid | | |
| I-hereby accep I further agree of my duties, a document is he copporation ha | t the appointment as registered agent and agree to act in this capacity, to camply with the provisions of all statutes relative to the proper and complete nd I am familiar with and accept the obligation of my position as registered agen ing filed merely to reflect a change in the registered office address, I hereby con is been notified in writing of this change. | performance nt. Or, if this firm that the | |
| Topsin | . 1/1// | | |
| | chalf of an entity: | | |
| | llapaugh, Asst. Secretary | | |
| | * * * FILING FEE: \$35.00 * * * | | |
| N | MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE 1AIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE. FL 32314 | i | |
| CR2E045 (8/05) | H070001 | 64624 3 | |