96000001928

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APR 19 2011

EXAMINER



CORPORATION SERVICE COMPANY.

ACCOUNT NO. : I2000000195

REFERENCE : 7457-02 / 7615192

AUTHORIZATION : C

COST LIMIT : \$ 35.00

ORDER DATE: April 15, 2011

ORDER TIME : 9:14 AM

ORDER NO. : 745702-009

CUSTOMER NO: 7615192

CHANGE OF AGENT

NAME: REZNICK GROUP, P.C.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_ CERTIFIED COPY XXX PLAIN STAMPED COPY

CONTACT PERSON: Matthew Young

EXAMINER'S INITIALS:

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

statement of cha	nge is submitted for a corporation organ	2, 607.1508, or 617.1508, Florida Statutes, ized under the laws of the State of Maryla ered agent, or both, in the State of Florida.	
	the corporation: REZNICK GROUP, I		
2. The principal	office address: 7700 Old Georgetown	Road, Suite 400, Bethesda, MD 2081	4
3. The mailing a	ddress (if different):		
4. Date of incorp	poration/qualification: 04/18/1996	Document number: F96000001928	
	d street address of the current registered at the threat of State:	gent and registered office on file with the	
	C T Corporation System		
	1200 South Pine Island Road		
	Plantation, FL 33324		
6. The name and (if changed):	I street address of the new registered agen	nt (if changed) and /or registered office	=
	Corporation Service Company		APR
	1201 Hays Street		ARY
	(P.O. Box NOT acceptable)		
	Tallahassee, FL 32301		
The street addre as changed will	ess of its registered office and the street be identical.	address of the business office of its registe	ered agent,
Such change wa authorized by th	is authorized by resolution duly adopted board, or the corporation has been no	I by its board of directors or by an officer tified in writing of the change.	so
		Maureen Cathell, Attorney in Fact	
I hereby accept I further agree to of my duties, and document is bein corporation has	d I am familiar with and accept the obli ng filed merely to reflect a change in the been notified in writing of this change.	(Printed or typed name and title) d agree to act in this capacity. utes relative to the proper and complete p igation of my position as registered agent, e registered office address, I hereby confi	erformance . Or, if this rm that the
D	on Service Company	04/14/2011	
Sig	nature of Registered Agent)	(Date)	
If signing on be	half of an entity:		
	et, Asst. Vice President Typed or Printed Name)		
·	* * * FILING FE	E: \$35.00 * * *	