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REGISTERED AGENT CHANGE

ATC GP INC.

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Page Count	0 2 3
Estimated Charge	\$35.00

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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 15, 2004

ATC GP INC. 116 HUNTINGTON AVENUE 11TH FLOOR BOSTON, MA 02116

SUBJECT: ATC GP INC. REF: F98000001170

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Michelle Milligan Document Specialist FAX Aud. #: H04000166576 Letter Number: 304A00050457

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

Delaware	in order to change its registi	ered office or registered agent, or both, in the State
of Florida.		5, , ,
1. The name of the	corporation: ATC GP Inc.	
2. The principal off	ice address: 116 Huntington Ava.,	Eleventh Floor, Boston, MA 02116
3. The mailing addr	ess (if different):	
4. Date of incorpore	tion/qualification: 3/2/98	Document number: F98000001170
5. The name and str Florida Departme		red agent and registered office on file with the
	Corporation Ser	rvice Company
	1201 Hay	res Street
	Tallahasses	, FL 32301
The name and st changed);	reet address of the new register	red agent (if changed) and /or registered office (if tion System ration System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (if tion System Red agent (if changed) and /or registered office (i
		- Jan
	c/o C T Coxpor (P.O. Box or personal med	ration System
	1200 South Pine Island Road	I, Plantation, Florida 33324
		reet address of the business office of its registered
such change was au uthorized by the bo	thorized by resolution duly ador ard, or the corporation has been	pted by its board of directors or by an officer so i notified in writing of the change. Traci Houck, Vice President
	num or vice chairman of the Bourt)	(Printed or types name the sate)
hereby accept the e further agree to co erformance of my a egistered agent. Of fice address, I here	ppointment as registered agent inply with the provisions of all s laties, and I am familiar with an , if this document is being filed by confirm that the corporation	t and agree to act in this capacity. statutes relative to the proper and complete nd accept the obligation of my position as merely to reflect a change in the registered n has been notified in writing of this change.
y: 11/15h	Lebzer	August, 9, 2004
signing on behalf of a	e of Registered Agendal PASSIFIEM SEED CORR VICE PROSECULARY	(Date)
	Printed Name)	(Capacity)

* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314