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FLORIDA DIVISION OF CORPORATIONS

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FAX #:

(850) 922-4000

FROM: BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

ACCT#:

075350000353

CONTACT: CATHY LEACH

PHONE: (212) 431-5000

FAX #:

(212) 431-5111

NAME: ALOF, INC.

AUDIT NUMBER...... H98000014786

DOC TYPE......REGISTERED AGENT CHANGE

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Florida Department of State, Jim Smith, Secretary of State

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

Pursuant to the provisions of sections 607,0502, 617.0502, 607,1508, or 617.1508, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office

ar registered	i agent, or both, in the State of i	fiorida.	
1a. The nan	ns of the corporation is: ALOF,	INC. ·	·
1b., Date of	incorporation 8/4/87	Document number	<u></u>
2. The nat XL CORRORATE	ne and address of the current re SRMOSS, INC., 4435 Old Winter Ga	egistered agent and office: dan Rd., 344 Office Pilare, Orlando	, EL 32811
	e and address of the new regist (P.O. Box Not Acceptable) TE SERVICES, INC., 4435 Old		· · · · · · · · · · · · · · · · · · ·
FL 32802	12 2,227 2,223 41,449 1772		
The etreet of its regist	address of its registered agent a ered agent as changed will be in	Jenucai,	
Such chan an officer s	ge was authorized by resolution to authorized by the board.	duly adopted by its board of d Cynthia Manko Typed or printed name and	. VICE - PLESIDENT
	DATE	•	
PROCESS IN THIS CI AGENT AN	EEN NAMED AS REGISTERED FOR THE ABOVE STATED CO ERTIFICATE, I HEREBY ACCEP ID AGREE TO ACT IN THIS CAI PROVISIONS OF ALL STATUT REORMANCE OF MY DUTIES, GATION OF MY POSITION AS F	RPOHATION AT THE POACE IN THE APPOINTMENT AS REP PACITY. I FURTHER AGREET IN THE PROPE	SISTERED TO COMPLY R AND COM-
BlumbergExcelsion	· SIGN	VATURE	ae /
62 White St NY, NY 10013 212-431-5000	DAT	E	ent) For: XL Corporate Svcs - H98000014786
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314			