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February 23, 2006

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

El	RC Can	ada LLC	
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Name Reservation		Reinstatement	
Reinstatement		Trademark	
		Other	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or \$08.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida. 1. The name of the limited liability company is: ETRC CANADA LLC 2. The mailing address of the limited liability company is: 1000 SOUTH PINE ISLAND ROAD, SUITE 900, PLANTATION, FL 33324 L0000000024**2**9 03/02/2000 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: CORPORATION SERVICE COMPANY Name **1201 HAYS ST** Address TALLAHASSEE, FL 32301 City, State and Zip 6. The name and address of the new registered agent and/or office: NRAI SERVICES, INC. Name 2731 EXECUTIVE PARK DR, SUITE 4 Florida street address (P.O. Box NOT acceptable) WESTON FL 33331

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

City. State and Zip

(Signature of a member or authorized representative of a member)

Angelo A. Gencarelli III, CFO, February 22, 2006 (Printed or typed name of signes)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608. F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agont) Man

> Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00