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ACCOUNT NO. : 072100000032 REFERENCE : 7228719 AUTHORIZATION COST LIMIT ORDER DATE: June 14, 2007 ORDER TIME : 12:03 PM ORDER NO. : 950721-005 CUSTOMER NO: 7228719 CHANGE OF AGENT NAME: NC SOLUTIONS, LLC PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY XX PLAIN STAMPED COPY CONTACT PERSON: Joyce Markley -- EXT# 2930

EXAMINER:

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

Pursuant to the provisions of sections 608.416 or 608.508, 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: NC SOLUTIONS 2. The mailing address of the limited liability company is: 25 L00000013077 10/25/2000 Document number Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: SABORIAN, LOUISE D Name 718 SPANISH DRIVE NORTH <u>LONGBOAT KEY FL 34228 US</u> City, State and Zip 6. The name and address of the new registered agent and/or office: Corporation Service Company Name 1201 Havs Street Florida street address (P.O. Box NOT acceptable) Tallahassee 32301 City, State and Zip 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. (Signature of a member or authorized representative of a member) (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, thereby confirm that the limited liability company has been notified in writing of this change.

Source L. Markey

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

as its agent

(Signature of Registered Agent)