Division of Corporation

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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To:

Division of Corporations

Fax Number : (550)205-0380

From:

Account Name : COMPORATE CREATIONS TETERRATIONAL INC.

Account Number : 110432003053 Phone : (305)672-0686

Tax Number

: (305)672-9110

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REGISTERED AGENT CHANGE

HQM OF FENTRESS, L.L.C.

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY Fursuant 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 boild in the State of Florida. 1. The name of the limited liability company is: HOM of Fentress, L.L.C. 2. The mailing address of the limited liability company is: 2979 PGA BLVD PALM BEACH GARDENS FL 33410 11/15/2000 L00000014056 Date of filing/registration in Plorids. 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: ADAMS, SANDRA L Name 2979 PGA BLVD Address PALM BEACH GARDENS FL 33410 City, State and Zip The name and address of the new registered agent and/or office: Corporate Creations Network Inc. 11380 Prosperity Farms Road #221E Florida street address (P.O. Box NOT acceptable) Palm Beach Gardens 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. (Signiture & a member or authorized representative of a member) Angela E. Howard, Assistant Secretary (Printed or Typed same of signee) 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 marsly reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change. Angela Howard, Asst. Secretary

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

(NHS18(10/09)

(Signature of Registered Agent)

Corporate Creations International Inc. 941 Fourth Street Miami Beach FL 33159 (561) 694-8107

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