## Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H050001410213)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

: (850)205-0380 Fax Number

From:

Account Name : SHOFFIELD LOWMAN Account Number : I20030000116 : (407)561-9900 Phone

Fax Number : (407)581-9801

## REGISTERED AGENT CHANGE

## ALURIA SOFTWARE LLC

Certificate of Status	0
Certifled Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Manu

Corporate Filing

Rublic Access Help



## 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: ALURIA SOFTWARE, LLC
- 2. The mailing address of the limited liability company is: 475 Montgomery Place, Altamonte Springs, FL 32714
- 3. Date of filing/registration in Florida: 04/10/2002
- Document Number: <u>L02000008553</u>
- 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Matthew G. Garrison	
900 Caitlin Pointe	
Longwood, FL 32750	

6. The name and address of the new registered agent and/or office:

William R. Lowman, Jr., Esq.	E
1000 Legion Place, Suite 1700	玉出
Orlando, FL 32801	<b>多</b> 至
i i i i i i i i i i i i i i i i i i i	77 -

It is hereby confirmed that the changes 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 programs agreement of the lipited liability company.

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

(Printed or typed name of signer)

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 obligation of my position as registered agent as provided for in Chapter 608, Florida Statutes. Or, if this document is being filed merely to reflect a change in the registered officefaddress, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

May 18, 2005