(02-0000) 10683

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Cynthia J. Sargent Legal Assistant 813 222 8182 sargentcj@bipc.com SunTrust Financial Centre 401 E. Jackson Street, Suite 2500 Tampa, FL 33602-5236

T 813 222 8180 F 813 222 8189 www.buchananingersoll.com

July 26, 2005

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Re:

Dynamic Fulfillment & Services, LLC

Document No. L02000010683

Dear Sir/Madam:

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

> Cynthia J. Sargent Buchanan Ingersoll PC 401 E. Jackson Street Suite 2500 Tampa, Florida 33602

For further information concerning this matter, please call me at (813) 222-8182.

Enclosed is a \$35.00 check made payable to the Department of State.

Very truly yours,

Cynthia J. Sargent

CIS/

Enclosure(s)

्रेशका सुक्रा तरहारामा ५३ माना १५३ माना विकास स्थापन विकास स्थापन सुन्न माना १५४ सामा १५४ सामा सुन्न भी महा #88371-v1;TAMI_GENERAL;SARGENTI

Pennsylvania :: New York :: Washington, DG :: Florida :: New Jersey :: Delaware :: California :: London :: Dublin

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.

agens, or com, in the state	•		
1. The name of the limite	d liability company is:	Dynamic Fulfillment & Sen	rices, LLC
		npany is : c/o Julie Connell	
4618 North Hale Avenu			·- ·
May 3, 2002		L02000010683	
3. Date of filing/registration in Florida 4. Document numb		ber	
5. The name of the registe Florida Department of S	State: James W. Goodwin	ered office address as shown or	n the records of the
	400 North Tampa St	Name reet, Suite 2300	
	Tampa, Florida 336	Address 02 State and Zip	CHANGE TO THE PROPERTY OF THE
6. The name and address of	of the new registered age	ent and/or office:	10 mg
Mark J. Bernet as Receiver for Dynamic Fulfill			
_	401 E. Jackson Stree	ame et, Suite 2500	
	Florida street address	(P.O. Box NOT acceptable)	
	Tampa,	FL 33602	
	City, Sta	ate and Zip	
confirmed that after the ch and the business office of	ange or changes are ma the registered agent will by confirmed that the c I liability company or as	nder the laws of the State of Flode, the Florida street address of be identical. Or, in the case of thange(s) was/were authorized to otherwise provided in the artispany.	f the registered office f a Florida limited
(Signature of a member or authorize	ved representative of a member)		•
Mark J. Bernet		·	
(Printed or typed name of signee)			
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm to (Signature of Registered Agent)	ntment as registered age of all statutes relative is accept the obligations its document is being fil that the limited liability	ent and agree to act in this cape to the proper and complete per of my position as registered ag ed to merely reflect a change i company has been notified in t	acity. I further agree to formance of my duties, ent as provided for in the registered office writing of this change.
(O.B. and O. Registered right)			

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

FILING FEE: \$25.00

INHS18(10/99)