

07-03-2007 11:54am From:Katz,Barron Squitiero & Faust, P.A.
Division of Corporations

3058540740

T-2 P.007048

Page 1 of 1

02000017883

Florida Department of State
Division of Corporations
Public Access System

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.

((H07000172321 3)))



H070001723213ABCX

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
Fax Number : (850)205-0380

From:
Account Name : KATZ,BARRON,SQUITERO AND FAUST
Account Number : 072627002473
Phone : (305)856-2444
Fax Number : (305)285-9227

FILED
07 JUL -3 AM 10:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REGISTERED AGENT CHANGE

NE-CADILLAC, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

RECEIVED
07 JUL -3 AM 8:00
DIVISION OF CORPORATIONS

Electronic Filing Menu

Corporate Filing Menu

Help

07-03-2007 11:54am From:Katz Baron Squitiero & Faust, P.A.

3058540740

T-747 P.000/040 F-680

**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: NE-CADILLAC, LLC
2. The mailing address of the limited liability company is: _____
1000 Omni Blvd., Newport News, VA 23606

July 16, 2002 L02000017883

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:

Linda O. MacLaren
 Name
79B South Federal Highway, Suite #100
 Address
Boca Raton, FL 33432
 City, State and Zip

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

Corpro, Inc.
 Name
2609 South Bayshore Drive, 7th Floor
 Florida street address (P.O. Box NOT acceptable)
Miami FL 33133
 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, this 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]
 (Signature of a member or authorized representative of a member)

Nicholas Economus

(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 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]
 (Signature of Registered Agent) Howard L. Friedberg, Jr.

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

THS18 (3/05)

FILED
 07 JUL -3 AM 10:16
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

H070001723213