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From:

Account Name Account Number : 072720000061

: FOLEY & LARDNER

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REGISTERED AGENT CHANGE

ACQUILUS II, LLC

Certificate of Status	0 ,
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## 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: Acquilus II, LLC			
2. The mailing address of the limited liability company is : PO Box 51584, Jacksonville Beach, FL 32240				
02/04/2003	L03000004257			
3. Date of filing/registration in Florida	4. Document number			
5. The name of the registered agent and the re Florida Department of State:	gistered office address as shown on the	records of the		
Foley & Lardner				
	Name			
One independent				
laskoparitta El 21	Address	कर्द	07	
Jacksonville, FL 3	ty, State and Zip	E8	8	
6. The name and address of the new registered	•	TETAR VHASSI	T 22	
F&LCom.		O <sup>ŢŢ</sup> ,	<u> </u>	
One Independent I	Name Drive, Suite 1300	)F STAI FLORI	M 8: 43	
Florida street adda	ress (P.O. Box NOT acceptable)		ည်	
Jacksonville	FL_32202			
City	, State and Zip	_		
If the limited liability company is not organize confirmed that after the change or changes are and the business office of the registered agent liability company, it is hereby confirmed that of the members of the limited liability company or the operating agreement of the limited liability company.	e made, the Florida street address of the will be identical. Or, in the case of a F tab change(s) was/were authorized by a py or as otherwise provided in the articular company.	i, it is hereby registered offic lonids limited n affirmative v les of organiza	ce ote tion	
Herbert L. Underwood, Jr., MGRM	•			
(Printed or typed name of signee)				
I hereby accept the appointment as registered comply with the provisions of all statutes related and I am familiar with and accept the obligate Chapter 608, F.S. Or, if this document is being address, thereby confirm that the limited liabes to the confirmation of the conf	d agent and agree to act in this capacity tive to the proper and complete perform one of my position as registered agent on filed to merely reflect a change in the stilly company has been notified in writing.	i, I further agn ance of my dut is provided for iregistered offi ing of this chan	ree to ties, in ice ice ge.	
•	ry P.O. Box 6327, Tallahassee, FL 3231 ING FEE: \$25.00	4		

INHS18 (8/05)

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