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CT CORPORATION SYSTM

PAGE 01/02

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Florida Department of State
Division of Corporations

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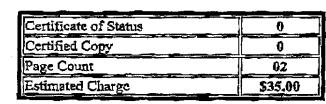
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REGISTERED AGENT CHANGE

FORCE FIVE RESEARCH, LLC



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859-245-6897

CT CORPORATION SYSTM

PAGE 02/02

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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the pr liability company s agent, or both, in th	ovisions of sections 608.416 ubmits the following statemer te State of Florida.	or 608.508, F nt in order to c	Torida Statutes, th change its register	e undersigned limited ed office or registered
i. The name of the	limited liability company is:	Force Five Resea	rch, LLC	
2. The mailing add	ress of the limited liability cor	mpany is : 414	Long Cove Court, On	nand Beach, FL 32174
04/07/2003		L	3000012385	
3. Date of filing/re	gistration in Florida	4.	Document number	r
5. The name of the Florida Department	registered agent and the registent of State:	ered office add	iress as shown on t	he records of the
~	Bernard B. Fulk, III			
		Name		
	414 Long Cove Court	Address		75 S
	Ormand Beach, FL 32174			
		State and Zip		是E B 一
6. The name and ad	dress of the new registered ag	ent and/or offic	ce:	FILED FEB 22 AM EURLIANT CH LLAHASSEE, I
	CT Corp	omation System		
		Name 1200 South Pine Island Road		
	Florida street address	Florida street address (P.O. Box NOT acceptable)		
	Plantaction	FL	33324	
	City, St	ate and Zip		
confirmed that after and the business off liability company, in of the members of to or the operating ago	ty company is not organized up the change or changes are made fice of the registered agent will is hereby confirmed that the che limited liability company compant of the limited liability. If	ide, the Florida l be identical. change(s) was/ or as otherwise company.	street address of the Or, in the case of a were authorized by	he registered office Florida limited an affirmative vote
Besnard B. Fulk, III (Printed or typed name of	signae)		•	
	appointment as registered agreement of all statutes relative it and accept the obligations or, if this document is being fluid in that the limited liability if Corporation System Assist	ent and agree to to the proper a of my position led to merely recompany has lark S. Eppley and Vice-Presider and Secretary	to act in this capac md complete perfor as registered agen glect a change in t been notified in wr	ity. I further agree to mance of my duties. I for in the provided for in the registered office using of this change.

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

INHS18 (8/05)