

**L030000/2607**

**Florida Department of State  
Division of Corporations  
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STATE  
TALLAHASSEE, FLORIDA

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Att: Lee Dines

09/15/05

**REGISTERED AGENT CHANGE**

**BCI OF TAMPA, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	823
Estimated Charge	835.00

**\* 25.00**

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Registration  
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850-205-0381 9/15/2005 2:05 PAGE 001/001 Florida Dept of State



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

September 15, 2005

BCI OF TAMPA, LLC  
831 NORTH MONROE STREET  
TALLAHASSEE, FL 32303

SUBJECT: BCI OF TAMPA, LLC  
REF: L03000012607

*Fixed*

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and resubmit the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers  
Document Specialist

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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 608.503, 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: BCI of Tampa, LLC

2. The mailing address of the limited liability company is : \_\_\_\_\_

831 NORTH MONROE STREET, TALLAHASSEE FL 32303

4/8/03 103000012607

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:

BRENNEIS, JOHN E Name

227 South Calhoun Street Address

Tallahassee, FL 32301 City, State and Zip

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

C T Corporation System Name

1200 South Pine Island Road Address

Florida street address (P.O. Box NOT acceptable)

Plantation FL 33324 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, it is 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.

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

MICHAEL ANDREW  
(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.

Conrad Ryan Spaid Jr.  
(Signature of Registered Agent)

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

09/15/2005

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