L03000014958

RESCURCE MANAGEMENT 4508 OAK FAIR BOULEVARD * SUITE 270 TAMPA, FLORIDA 33610 (Address)		
(City/S	State/Zip/Phon	e #)
PICK-UP	TIAW	MAIL
(Busin	iess Entity Nai	me)
(Docu	ment Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ing Officer:	
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M05/4/05





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.

and the state of a tot total	
1. The name of the limited liability com	npany is: <u>Infiniti Resource Management</u> .
	ability company is: 4508 Oak Fair Blvd. Suite 270.
3	Tampa, Florida 33616
, ,	1 ange, 1 10(1a) 23410
3. Date of filing/registration in Florida	L 03000014958
3. Date of Hing/registration in Florida	4. Document number
5. The name of the registered agent and Florida Department of State:	the registered office address as shown on the records of the
-	N Donnie I
	Name
_4508 Oa	Kfair Blyds. Suite 270 Address Porida 33610 City, State and Zip
Tampa, F	Torida 33610
	City, State and Zip
6. The name and address of the new reg	istered agent and/or office:
Souch	istered agent and/or office: La, Potricia R. Name Name Name
, , , , , , , , , , , , , , , , , , , ,	The state of the s
H508 Oak	et address (P.O. Box NOT acceptable)
Florida Silee	et address (P.O. Box NOT acceptable) FL 33610
Tampa,	FL 33610 Some State and Zip
·	City, State and Zip
confirmed that after the change or chang and the business office of the registered liability company, it is hereby confirmed	
1 ()	or a memory
(Printed or typed name of signce)	
	istered agent and agree to act in this capacity. I further agree to as relative to the proper and complete performance of my duties, bligations of my position as registered agent as provided for in is being filed to merely reflect a change in the registered office ad liability company has been notified in writing of this change.

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

INHS18(10/99)

FILING FEE: \$25.00