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## REGISTERED AGENT CHANGE

RANI MSB1000, LLC

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10/7/2003

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

Pı lic ag	ursuant to the provisions of sections 608. Ability company submits the following state ent, or both, in the State of Florida.	116 or ment i	608.508, n order to	Florida change	Statutes, its regist	the under: ered office	signed limited or registered
ī,	The name of the limited liability company	is:	Ravi	MS	B.100	JO,L	<u> </u>

1. The name of the limited liability company is: Kani VVSB COU 1
2. The mailing address of the limited liability company is: 1000 Collins Aronve.
Muni Beach, FL 33BG.
06/13/2003 403000023578
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:  Small Results Solutions  Name
4403 Vineland Rosel, Ente B12
Orland State and Zip
6. The name and address of the new registered agent and/or office:
Scott W. Bourger, Sog: 420 Loncoln Road Sube 372
Florida street address (P.O. Box NOT acceptable)
Man Beacht 38139 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.

or authorized representative of a member)

(Printed or typed name of signee)

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. for if this document is being filled 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.

Agent

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

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FILING FEE: \$25.00

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