Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0380

: GASSMAN & ASSOCIATES, P.A. Account Name

Account Number: 075350000514 : (727)442-1200 Phone

: (727)443-5829 Fax Number

REGISTERED AGENT CHANGE

PESI NUMBER 1, L.L.C.

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MAY. 7. 2007 3:18PM

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

Pursuant to the provisions of sections llability company submits the following agent, or both, in the State of Florida.	508.416 or 608.508. Florida Statutes, the undersigned limited statement in order to change its registered office or registered
1. The name of the limited liability con	ipany is: PESI NUMBER 1, L.L.C.
2. The mailing address of the l im ited li	ability company is:
1128 WEST MAIN STREET, INVER	NESS, FL 34450
10/27/2003	L03000041137
3. Date of filing/registration in Florida	4. Document number
Florida Department of State:	the registered office address as shown on the records of the DE, LOUIS A ESQ.
	Name
1245 COU	RT STREET, SUITE 102 Address
CLEARWA	ATER, FL 33756 City, State and Zip
6. The name and address of the new reg	distered agent and/or office:
GASSMAN	v, ALAN
1245 COU	RT STREET, SUITE 102
Florida stre	RT STREET, SUITE 102 et address (P.O. Box NOT acceptable) ARE
CLEARWA	TER, FL 33756 SA 1
	City, State and Zip
confirmed that after the change or chan and the business office of the registered liability company, it is hereby confirme of the members of the limited liability or the operating agreement of the limite	
(Signature of a member of authorized representative	of a member)
ALAN GASSMAN, AUTHORIZED (Printed or typed name of signee)	REPRESENTATIVE
	gistered agent and agree to act in this capacity. I further agree to es relative to the proper and complete performance of my duties, obligations of my position as registered agent as provided for in is being filed to merely reflect a change in the registered office ted liability company has been notified in writing of this change.
(Signature of Registered Agent)	
Division of Corpora	ations, P.O. Box 6327, Tallahassee, FL 32314

INHS18 (8/05)