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To:	Division of Corporations	TARY ASSE	-	100 mm
	Fax Number : (850)617-6383	E, F	Ž	11
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D. BRUCE

SEP 08 2011

**EXAMINER** 

## STATEMENT OF CHANGE OF REGISTERED OFFICE $\oplus R$ 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.

2. (a) Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  (b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  795   Jones Branch Drive, McLean, VA 221  11/07/03  L03(00043221  3. Date of filing/registration in Florida  4. L'ocument number  5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Agent:  Registered Agent:  Registered Office Address:	07
(Note: MUST BE STREET ADDRESS)  (b) Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)  11/07/03  103(00043221  3. Date of filing/registration in Florida  4. Lincument number  5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State Registered Agent:  Mictael Heidt	-
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11/07/03  L03000043221  3. Date of filing/registration in Florida  4. Discument number  5. (a) Registered Agent and Registered Office shown on the necords of the Florida Dept. of State Registered Agent:  Michael Heidt	-
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Registered Agent: Michael Heidt	e:
Registered Agent: Michael Heidt	
4000 Hollywood Blvd., Suite 735 Souht	
	(.)
Registered Office Address:  Hollywood FL 33021	
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NEW Registered Agent:	-
NEW Registered Office Address: 120   South Pine Island Road	4 5
(MUST BE FLORIDA STREET ADDRESS) Play ration FLORI	1 C
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Agent:  CT Corporation System	7 T 7 T 1 T Y 1 T

FILING FEE: \$25.00