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OF THE SECTION OF STATE

WATTERSON HYLAND & FLEMING

F. OWEN EVANS ATTORNEY AT LAW

January 21, 2004

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

RF.

Hurricane Test Laboratory, LLC

Statement of Change of Registered Agent

File No.: 2448.000

To Whom It May Concern:

Enclosed herewith please find the Statement of Change of Registered Office or Registered Offi

Mailing information is provided below, along with a telephone number for your convenience in contacting me should you have any questions or require additional information concerning matter.

F. Owen Evans III, Esq. WATTERSON HYLAND & FLEMING, P.A. 4100 RCA Boulevard Suite 100 Palm Beach Gardens, FL 33410 (561) 627-5000

Very truly yours

F. Owen Evans, III

FOE:gca Enclosures

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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 608.508, 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.

1. The name of the limited	liability company is:	Hurricane	Test Laborat	ory, LLC		
2. The mailing address of the	he limited liability con	npany is: _60	655 Garden Ro	ad,		<u>· </u>
Riviera Beach, FL	33404					
December 30, 2003 L03000056630						
3. Date of filing/registration	n in Florida	4.	Document nun	nber		
5. The name of the registere Florida Department of Sta	ed agent and the registerate:	ered office ad	dress as shown c	n the record	ds of tl	1e
_	F. Owen Evans I	II				
		Name				
_	4100 RCA Boulev	ard, Suite Address	100			
Palm Beach Gardens, FL 33410			33410		4	7 (7 m 7 m
	City, S	State and Zip			S	
6. The name and address of the new registered agent and/or office:				04 JAN 23	AR FE	
_	Vinu J. Abraham	1		-	AH 10: 57	ED.
		lame			=	· (/)
_	6655 Garden Roa			· - ·	CJI	
	Florida street address	(P.O. Box NC	OT acceptable)		7	<u>5</u> 7
	District and Descrip	EI 22	404			50
	Riviera Beach	rt 33. ate and Zip	404			
	City, Su	ate and Zip				
If the limited liability compactonfirmed that after the charand the business office of the liability company, it is hereby the members of the limited of the operating agreement of the compact of the limited of the operating agreement of the compact of the limited of the operating agreement of the limited of the operating agreement of the limited of	nge or changes are ma le registered agent will by confirmed that the c liability company or as the limited liability con	ide, the Florid I be identical. change(s) was s otherwise pr mpany.	a street address of Or, in the case of Nwere authorized	of the regist of a Florida I by an affir	tered o limite mative	ffice d e vote of
Vinu J. Abraham						
(Printed or typed name of signce)						
I hereby accept the appoint comply with the provisions of and I am familiar with and a Chapter 608, F.S. Or, if this address, I hereby confirm the (Signature of Registered Agent)	ment as registered ago of all statutes relative accept the obligations s document is being fi at the limited liability	ent and agree to the proper of my positio led to merely company has	to act in this ca and complete pe n as registered a reflect a change s been notified in	pacity. I finerformance igent as pro in the regis writing of	rther a of my wided stered this ch	gree to duties, for in office ange.
Vinu J. Abraham						

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

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