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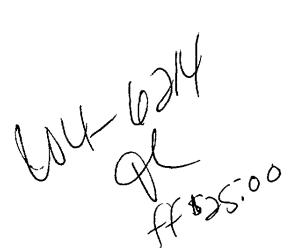
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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 lin	nited liability company is: 🔔	DADE	BRY INVEST	MENT GROU	1 <u>p 21.6</u>
2 The mailing address	s of the limited liability com	nanvis:	12945 VANO	ERBILT DR	IVE.
2. 110 11011111	ling address of the limited liability company is: 12945 VANOER 81. NAPLES, FL 341			34110	
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3. Date of filing/regis	tration in Florida		4. Document number		
5. The name of the reg Florida Department		_		the records of the	C
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	NAPLES	FL	14/10	·=	
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6. The name and address	ess of the new registered age	nt and/or o	office:	•	
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	12555 S.	ame,	. 24	<u> </u>	ಾರ್ ಪ್ರಾಥ
				**************************************	<u> </u>
	Florida street address (P.O. Box	NOT acceptable)	*	
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	DAVIE City, Sta	te and Zip		المستراب المستراب	4 - ,
confirmed that after the and the business office liability company, it is the members of the lin	company is not organized un ne change or changes are made e of the registered agent will shereby confirmed that the conited liability company or as ent of the limited liability con	de, the Flo be identic hange(s) v otherwise	rido etteat eddrage ol	the remistered of	tica
(Signature of a member or at	athorized representative of a member)		· - ·-··· · · · !! 7	T.	
Tomes	TORIE				
(Printed or typed name of sig			•	· = -	
I hereby accept the a comply with the provi and I am familiar with Chapter 608, F.S. Or address, I hereby con	ppointment as registered age sions of all statutes relative in and accept the obligations if this document is being fil firm that the limited liability	ent and ag to the prof of my posi ed to mere company	ree to act in this cap per and complete per tion as registered as by reflect a change t has been motified in	acity. I further a formance of thy b tent as provided f in the rightered of writing of this chi	rree to luties, or in ffice ange.
(Signature of Registered Ag	ent)				
Di	vision of Corporations, P.O	. Box 632	7, Taliahassee, FL	32314	
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