## Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

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Account Name

: INCORPORATING SERVICES FL

Account Number : 120050000052

Phone

: (302)531-0855

Fax Number

: (865) 223-0765

#### REGISTERED AGENT CHANGE

## DYNETECH ACQUISITION II, LLC

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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 60 liability company submits the following statement in agent, or both, in the State of Florida.	08,508, Florida Statutes, the order to change its registered	· undersigned limited d office or registered	i
1. The name of the limited liability company is: Dyn	etech Acquisition II, LLC	· · · · · · · · · · · · · · · · · · ·	
2. The mailing address of the limited liability company	y is : 285 S. Orange Ave	),	
6th Floor, Orlando, FL 32801	<del>-</del>		•
6/14/2004	L04000044764		
3. Date of filing/registration in Florida	4. Document number	<del>-</del> "	
5. The name of the registered agent and the registered of Florida Department of State:	office address as shown on the	e records of the	
<u>Stephen V Rosin</u> Name			
255 S. Orange Aven			
Addres			
Orlando, FL 32801 City, State a	and Zin	Acc ~:	
6. The name and address of the new registered agent an	•	2001 OCT 26 SECRETARY ALLAHASSEE	_
Incorporating Service	es, Ltd.	CT TA	
. Name		SEY SEE	
1540 Glenway Drive Floride street address (P.O.	Day MOT connetchia)		7
Lifering Sheet geness (Life:	Box NOT acceptable)	LOSE SIA:	
	32301		_
City, State and	d Zip	> 0	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be idliability company, it is hereby confirmed that the change of the pentitors of the limited liability company or as or the operating agreement of the limited hisbility company.	e Florida street address of the lentical. Or, in the case of a F c(s) was/were authorized by a therwise provided in the articl	registered office Torida limited in affirmative vote	
(2/2): /h/	·		
(Signifian of a member or authorized representative of a member)	<del></del> _		
Patricia T. Wilson, Secretary			
I hereby accept the appointment as registered agent an comply with the provisions of all statutes relative to the and I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability completely the state of acceptance of Registered Asmit	d agree to get in this capacity proper and complete perform position as registered agent a merely reflect a change in the any has been notified in writing	. I further agree to vance of the duties, as provided for in registered office ng of inis change.	
Division of Corporations, P.O. Box	6327. Tallahassee. FL 3231	4	
FILING FEE:		-	

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