

104 0000 64537

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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TALLAHASSEE, FLORIDA

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104-64537
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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: Viper Capital Advisors, LLC
2. The mailing address of the limited liability company is : 15508 Avocetview Court
Lithia, Florida 33547

08/30/2004

L04000064537

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

Erik Lebsack

Name

15508 Avocetview Court

Address

Lithia, Florida 33547

City, State and Zip

6. The name and address of the new registered agent and/or office:

Erik Lebsack

Name

4365 Lynx Paw Trail

Florida street address (P.O. Box NOT acceptable)

Valrico, Florida FL 33594

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Erik Lebsack
(Signature of a member or authorized representative of a member)

Erik Lebsack

(Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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

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TALLAHASSEE, FL 32314



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 27, 2005

JANET GRANNUM
MICHAEL LAPAT
221 NORTH LASALLE STREET, SUITE 1137
CHICAGO, IL 60601

SUBJECT: VIPER CAPITAL ADVISORS, LLC
Ref. Number: L04000064537

We have received your document for VIPER CAPITAL ADVISORS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 305A00073566

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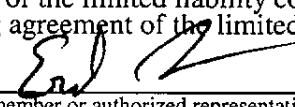
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