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SECRETARY OF STATE



Blalock, Walters, Held & Johnson, P.A.

Anthony D. Bartirome Robert G. Blalock Lisbeth P. Bruce Derek A. DiPasauale Jonathan D. Fleece Dana Carlson Gentry Barbara Ann Held Charles F. Johnson III Mary Fabre LeVine Melanie Luten Fred E. Moore Stephen G. Perry William C. Robinson, Jr. Robert S. Stroud Aaron J. Tracv Clifford L. Walters James R. White

April 19, 2007

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32302-1300

RE: STATEMENT OF CHANGE OF REGISTERED OFFICE OR

REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY

COMPANY

FINGERHUT & ASSOCIATES, LLC

OFN: 26541.000

Dear Sir/Madam:

We are submitting for filing with the Florida Secretary of State the STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY of FINGERHUT & ASSOCIATES, LLC (Document #L04000076786). The filing fee of \$25.00 is enclosed.

Please call our office if you have any questions.

Kindest regards,

Arlene Silverman Corporate Paralegal

Enclosures

cc: Melanie Luten, Esq.

ph: 941.955.5541

COVER LETTER

| TO: Registration Section Division of Corporations | | |
|--|---|--|
| SUBJECT: FINGERHUT & ASSOC (Name of L | IATES, LLC imited Liability Company) | |
| Dear Sir or Madam: | | |
| The enclosed Registered Agent/Registered O | office Change and fee(s) are submitted for filing. | |
| Please return all correspondence concerning | this matter to the following: | |
| Arlene Silverman, Corporate Para (Name of Person) | legal | |
| Blalock, Walters, Held & Johnson (Firm/Company) | n, P.A. | |
| 802 11th Street West | | |
| (Address) | · · · · · · · · · · · · · · · · · · · | |
| Bradenton, FL 34205-7734 | | |
| (City/State and Zip Code) | | |
| For further information concerning this matte | er, please call: | |
| Arlene Silverman | at (941) 748-0100 | |
| (Name of Person) | (Area Code & Daytime Telephone Number) | |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 | |
| Enclosed is a check for the following | g amount: | |
| ✓ \$25 Filing Fee | \$55 Filing Fee & Certified Copy | |

10/30/2004 22:02 9413590401 FINGERHUT ASSOCIATES PAGE 02

BOTH FOR LIMITED LIARITY COMPANY

| Pursuant to the provisions of sections 608.41 liability company submits the following statem agent, or both, in the State of Florida. | l6 or 608.508, Florida Statutes, cent in order to change its regis | , the undersigned limited stered office or registered |
|--|--|--|
| 1. The name of the limited liability company is | : FINGERHUT & ASSOCIATES | , LLC |
| 2. The mailing address of the limited liability of | company is : 7302 KENSINGT(| ON COURT. |
| UNIVERSITY PARK, FL 34201 | | |
| | | |
| 10/18/2004 | L04000076786 | . |
| 3. Date of filing/registration in Florida | 4. Document number | |
| 5. The name of the registered agent and the registered agent age | stered office address as shown or | n the records of the |
| BLALOCK, WALTER | RS, HELD & JOHNSON, P.A. | |
| | Name | |
| 802 11TH STREE | | |
| | Address | |
| BRADENTON, FL | | · ·~- |
| Chy, | State and Zip | 7007 SEC |
| 6. The name and address of the new registered a | gent and/or office: | APR CREI |
| ROBERT FINGE | ŔĦŨŦ | IT IL I |
| 4-0-0 | Name | |
| 7302 KENSINGTO | N COURT | |
| Florida street addres | s (P.O. Box NOT acceptable) | ED PH 2: 20 OF STATE |
| UNIVERSITY PARK | , FL 34201 | 20 TE NDA |
| | State and Zip | |
| If the limited liability company is not organized confirmed that after the change or changes are mand the business office of the registered agent whisbility company, it is hereby confirmed that the of the members of the limited liability company or the operating agreement of the limited liability company or the operating agreement of the limited liability. (Signature of a member or authorized representative of a member of | nade, the Florida street address of ill be identical. Or, in the case of a change(s) was/were authorized or as otherwise provided in the sy company. | f the registered office f a Florida limited by an affirmative vote |

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 108, 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 FILING FEE: \$25.00

(Printed or typed name of signee)