

## Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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: (850)617-6380

Erom:

Account Name

: FOLEY & LARDNER

Account Number : 072720000061

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: (904)359~2000

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## REGISTERED AGENT CHANGE

ACQUILUS III, LLC

Certificate of Status 0 Certified Copy Ð Page Count 01 Estimated Charge \$35.00

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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 State liability company submits the following statement in order to change its reagent, or both, in the State of Florida.	ites, the undersigned limited gistered office or registered
The name of the limited liability company is: Acquilus III, LLC	
2. The mailing address of the limited liability company is : PO Box 51584, Jacksonville Beach, FL 32240	
12/16/2004 L04000091290	
3. Date of filing/registration in Florida 4. Document i	ıumber
5. The name of the registered agent and the registered office address as show Florida Department of State:	n on the records of the
Foley & Lardner LLP	_
Name One Independent Drive, Suite 1300	
Address	_
Jacksonville, FL 32202	
City, State and Zip	- AL SH - SH
6. The name and address of the new registered agent and/or office:	FIL 2001 OCT 22 SECRETARY ( LLAHASSEE
F & L Corp.	TAF.
Name	FILE OCT 22 A RETARY OF S HASSEE, FL
One Independent Drive, Suite 1300	3 7 P M
Florida street address (P.O. Box NOT acceptable	Se G
Jacksonville FL 32202	ē∺ ω
City, State and Zip	0
If the limited liability company is not organized under the laws of the State of confirmed that after the change or changes are made, the Florida street addressed and the business office of the registered agent will be identical. Or, in the calliability company, it's bereby confirmed that the change(s) was/were author of the dembers of the limited liability company or as otherwise provided in or the perating agreement of the limited liability company.  **Element of a member or authorized representative of a member)*  Herbert L. Underwood, Jr., MGRM	ess of the registered office ase of a Florida limited ized by an affirmative vote
(Printed or typed name of signer)	
I hereby accept the appointment as registered agent and agree to act in this comply with the provisions of all statutes relative to the proper and complete and I am familiar with and accept the obligations of my position as registere Chapter 608, F.S. Or, if this document is being filed to merely reflect a character of the confirm that the limited liability company has been notified by the liability by the liability by the liability by the liability by the liabilit	capacity. I further agree to performance of my duties, d agent as provided for in ige in the registered office I in writing of this change.
Charles V. Hedrick, Authorized Bignatory Division of Corporations, P.O. Box 6327, Tallahassee,	FL 32314

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