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Division of Corporations

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REGISTERED AGENT CHANGE

FLORIDA HURRICANE SERVICES LLC

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CORROLATA FILLIO

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6/4/2005

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

Pursuant to the provisions of liability company submits the fi agent, or both, in the State of Fi	sections 608.416 ollowing statement orida.	or 608.508, nt in order to	Florida Statutes, change its regis	, the undersigned the control of the	gned lin or regist	nitea terea
1. The name of the limited liabi	lity company is:	Florida Hur	ricane Services	LLC		
2. The mailing address of the li	mited liability con	mpany is:				
4502 35th Street, Suite 300,	Orlando, FL 328	811				
1/10/2005		_	L05000006566			
3. Date of filing/registration in	Florida	4	. Document num	ber		
5. The name of the registered ag Florida Department of State: Victor	ent and the registe or Juskevicius	ered office ad	dress as shown or	n the records	of the	
2325	5 Lake Debra Dr	Name rive		•		
Orla	ndo, FL 32835	Address				
		State and Zip				
6. The name and address of the	new registered age	ent and/or off	īce:			
Busi	ness Filings Inc	corporated				
1203	S Governors Squ	lame uøre Blvd., S	ite 101			
Flor	ida street address	(P.O. Box NO	OT acceptable)			
Talla	hassee	FL 32301				
	City, Sta	ate and Zip	-			
If the limited liability company is confirmed that after the change of and the business office of the regliability company, it is hereby contained liability the operating agreement of the limited liability the operating agreement of the limited liability.	or changes are mad gistered agent will informed that the c	ide, the Florid I be identical. change(s) was	a street address of Or, in the case of	of the registers of a Florida lir	ed office nited	es af
(Signature of a member or authorized repre-	entative of a weenhord	<u> </u>			` - ;	
		,		経る	ا تی	
Glenn Merritt, Member (Printed or typed name of signer)				ਜਿੱ <i>ਵ</i> ੇ ਜਾਂ ''	7	, * ;
I hereby accept the appointment comply with the provisions of all and I am familiar with and accept the provisions of the Chapter 608, F.S. Or, if this doing address, I hereby confirm that the	t as registered age I statutes relative to the obligations Sument is being fil te limited liability	ent and agree to the proper of my position led to merely to company has	to act in this cap and complete per n as registered at reflect a change i s been notified in	acity. I further formance of interest as provide in the register writing of this	er agree my dutie led for it red offic s change	es, es, n e e.

(Signature of Registered Agent)

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

INH\$18(10/99)

FILING FEE: \$25.00