## L050000 27004

(Re	equestor's Name)					
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(Address)						
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PICK-UP	☐ WAIT	MAIL				
(Business Entity Name)						
(Document Number)						
Certified Copies	_ Certificate:	s of Status				
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DE MAY 30 AM II: 29
DISTRICT CONTROL OF THE PROPERTY OF THE PR

B. KOHR

JUN - 2 2008

EXAMINER





ON SERVICE COMPANY					
	ACCOUNT NO.	:	072100000	032	
	REFERENCE	:	513067	4323387	
	AUTHORIZATION	:	Smile	Lenan	J-1, 00
	COST LIMIT	:	\$ 25.00	man	ALL BANK
ORDER DATE : M	AY 30, 2008				OBMAY 30 M 8
ORDER TIME :	3:00 AM				FELCE ST
ORDER NO. : 5	L3067-050				ORIGINATE TO
CUSTOMER NO:	4323387				1
, atame	CHANGE OF A		<u>T</u>	·	
NAME:	FRK PUTNAM, L	ьс			
PLEASE RETURN T	HE FOLLOWING AS	PR	OOF OF FIL	ING:	
CERTIFII PLAIN S'	ED COPY FAMPED COPY				
				·	,
CONTACT PERSON:	Kathy Drake -	- E	XT# 2959		
	•		EXAMINER:		

## 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	d liability company is:	FRK PUT	NAM, LLC			
2. The mailing address of	the limited liability co	ompany is:	··· - · · ·			
1200 Urban Center Dr	rive, Birmingham,	AL 35242				
03/17/2005			L05000027004	4		
3. Date of filing/registration in Florida			4. Document number			
5. The name of the registe Florida Department of S	Barbara  155 E  Jackson	C. Johnston Name ast 21st Stre Address ville, FL 32	, Esq. eet 2206	on the records HAY 30 AM 8: 14  On the records HAY 30 AM 8: 14		
6. The name and address of the new registered agent and/or office:						
	Corporation		mpany	<b>.</b>		
	1201	Name Hays Street				
Florida street address (P.O. Box NOT acceptable)						
	Tallahassee	FL	32301			
	City, S	State and Zip				
If the limited liability come confirmed that after the chand the business office of liability company, it is her of the members of the limit or the operating agreement (Signature of a member or authorized)	tange or changes are not the registered agent we be confirmed that the little liability company tof the limited liability	nade, the Flori ill be identical e change(s) way or as otherwi y company.	s of the State of I da street address I. Or, in the case as/were authorize se provided in the	Florida, it is hereby of the registered office of a Florida limited ed by an affirmative vote e articles of organization		
Maureen Cullen, Auth	orized Person			•		
(Printed or typed name of signee)  I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F.S. Or, if the address, I hereby confirm (Signature of Registered Agent)	ntment as registered as of all statutes relatively accept the obligation his document is being that the limited liability of the light of the limited liability of the light o	um_		spacity. I further agree to erformance of my duties, agent as provided for in 3 in the registered office 1 writing of this change.		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00