LU5000038127

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ALLAMASSEE, FI ORMA

B. KOHR NOV - 4 2008

EXAMINER



ON SERVICE COMPANY					
·	ACCOUNT NO.	:	0721000000)32	•
	REFERENCE	:	778239	7381005	
	AUTHORIZATION	:0	Smell de	man	
	COST LIMIT	:	(\$\\\25.00	,	10.00
ORDER DATE :	October 31, 2008 3:51 PM				FILED B. 15
ORDER NO. :	778239-025				C. T.S.
CUSTOMER NO:	7381005				On the state of th
				· -	·
CHANGE OF AGENT					
NAME:	CICERO INDUST	RIE	S AMERICA,	LLC	
CERTIF	THE FOLLOWING AS TIED COPY STAMPED COPY	PR	OOF OF FILI	ING:	
CONTACT PERSON	I. Heather Chapm	an	EXT# 290	18	

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. Name of the limited liability company: <u>CICERO</u>	INDUSTRIES AMERICA, LLC
2. (a) Principal office address of limited liability composite (Note: MUST BE STREET ADDRESS)	pany: One 3rd Avenue South Naples FL 34102
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	.c/o Quercus, LLC 2715 M Street NW #300 Washington, DC 20007
04/19/2005	L05000038127
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	4. Document number on the records of the Florida Dept. of State: CT Corporation 1200 S. Pine Island Road
Registered Agent:	C T Corporation
Registered Office Address:	1200 S. Pine Island Road Plantation, FL 33324
(b) Enter name of <u>NEW Registered Agent</u> and/or	NEW Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street Tallahassee ,FL 32301
If the limited liability company is not organized under that after the change or changes are made, the Florida soffice of the registered agent will be identical. Or, in the change confirmed that the change(s) was/were authorized liability company or as otherwise provided in the article limited liability company. (Signature of a member or authorized representative of a member)	street address of the registered office and the business
Maureen Cullen, Authorized Person (Printed or typed name of signee)	
I hereby accept the appointment as registered agent a comply with the provisions of all statutes relative to the am familiar with and accept the obligations of my posi F.S. Or, if this document is being filed to merely reflect confirm that the limited liability company has been not Corporation Service Company By: Hereby accept the appointment as registered agent agent as registered agent as registered agent.	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, and I titon as registered agent as provided for in Chapter 608, at a change in the registered office address, I hereby tified in writing of this change. eather Chapman as its agent

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