## LU5000073390

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ACCOUNT NO. : 072100000032

REFERENCE : 683284

4369509

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE: November 1, 2005

ORDER TIME : 11:45 AM

ORDER NO. : 683284-085

CUSTOMER NO: 4369509

CHANGE OF AGENT

NAME: FREEDOM SERVICE COMPANY, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

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CONTACT PERSON: Darlene Ward -- EXT# 2935

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 limit	ed liability company	is: FREEDOM	SERVICE COMPA	ANY, LLC	
2. The mailing address of	f the limited liability	company is:			
250 Technology Park Drive,	Lake Mary, FL 32746				
July 26, 2005			L05000073390		
3. Date of filing/registration in Florida			4. Document number		
5. The name of the registr Florida Department of	ered agent and the reg State:	gistered office	address as show	n on the records of the	
•	N	RAI Services, In	c.		
Name					
2731 Executive Park Drive, Suite 4					
Addres			. – –	7 O	
Weston, FL 3					
City, State and Zip					
Address Weston, FL 33331 City, State and Zip  6. The name and address of the new registered agent and/or office:  Corporation Service Company  Name 1201 Hays Street					
Corporation Service Company					
Name				50 F.	
1201 Hays Street					
Florida street address (P.O. Box NOT acceptable)					
	Tallahassee	FL	32301		
	City,	State and Zip	)		
If the limited liability con confirmed that after the cland the business office of liability company, it is he of the members of the lin or the operating agreement (Signature of a member or author)	nange or changes are the registered agent reby confirmed that the nited liability comparate of the limited liability.	made, the Flowill be idention the change(s) by or as otherwity company.	orida street addrest al. Or, in the cast was/were authori	f Florida, it is hereby ss of the registered office se of a Florida limited zed by an affirmative vote the articles of organization	
Maureen Cullen, Attorney In I	₹act				
(Printed or typed name of signee)					
- Clim a C			ree to act in this ter and complete to the term of the	capacity. I further agree to performance of my duties, I agent as provided for in ge in the registered office in writing of this change.	
(pikuamic of wekistere Wkelit)	Elizabeth A. Dawson, Ass	st. V.P.			

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