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SECRETARY OF STATE SINISION OF CORPORATIONS

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 liability company is: Service South, LLC 2. The mailing address of the limited liability company is: 4725 Piedmont Row Dr, Suite 400, Charlotte, NC 28210 9/26/2005 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Thomas C. Byrne Name 401 E. Las Olas Blvd., Suite 1220 Address Fort Lauderdale, FL 33301	
4725 Piedmont Row Dr, Suite 400, Charlotte, NC 28210 9/26/2005 3. Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Thomas C. Byrne Name 401 E. Las Olas Blvd., Suite 1220	
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Name 401 E. Las Olas Blvd., Suite 1220	
401 E. Las Olas Blvd., Suite 1220	
Address	
Address Fort Lauderdale, FL 33301	
Fort Lauderdale, FL 33301	o 및
	J S
City, State and Zip	DIVISION O
6. The name and address of the new registered agent and/or office:	1 75
NRAI Services, Inc.	JRPORATIONS PM 12: 02
Name 2731 Executive Park Drive, Suite 4	는 A
Florida street address (D.O. Day NOT	202
Florida street address (P.O. Box NOT acceptable)	U)
Weston FL 33331	
City, State and Zip	
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered of and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative of the members of the limited liability company or as otherwise provided in the articles of organize or the operating agreement of the limited liability company. (Signature of a member of authorized representative of a member)	l vote
Thomas C. Byrne, Manager	
(Printed or typed name of signee)	
I hereby accept the appointment as registered agent and agree to act in this capacity. I further age comply with the provisions of all statutes relative to the proper and complete performance of my dand I am familiar with and accept the obligations of my position as registered agent as provided for Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered of address, I hereby confirm that the limited liability company has been notified in writing of this characters. Signature of Registered Agent. Anthony J. Alexander, Asst. Secretary	ree to uties, or in ffice nge.

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