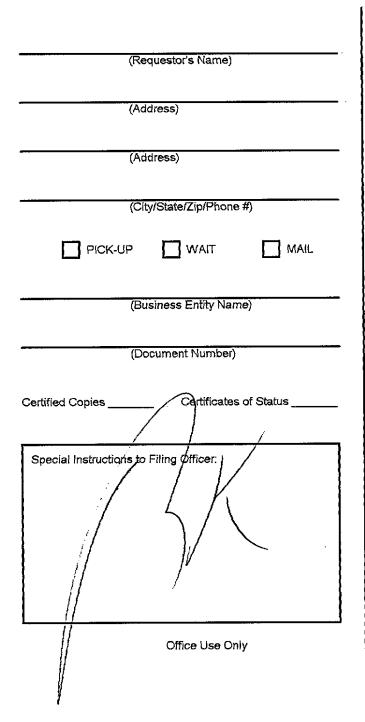
## L06000022646











DN \$ERVICE COMPANY.		
ACCOUNT NO.	: 072100000032	
REFERENCE	: 054271 7108498	
AUTHORIZATION		
COST LIMIT	godbelena 2	
ORDER DATE: April 24, 2006 ORDER TIME: 2:35 PM	A 24 M. T.	
ORDER NO. : 054271-005	GATE S	
CUSTOMER NO: 7108498		
CHANGE OF AGENT		
NAME: TEMERITY HOLDINGS, L.L.C.		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY PLAIN STAMPED COPY		
CONTACT PERSON: Susie Knight	EXT# 2956	
	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 liability company is: $\underline{\underline{T}}$	EMERITY HOLDINGS, L.L.C.
2. The mailing address of the limited liability comp	pany is: 10912 S.W. 59th Court,
Miami, Florida 33156	
03/02/2006	L06000022646
3. Date of filing/registration in Florida	4. Document number
5. The name of the registered agent and the register Florida Department of State:	
Del Cristo, Jaqueline, Esq	., c/o Becker & Poliakoff, P.A.
	lame 3
121 Alhambra Plaza	10th Floor PS S
	Idress
	0.22121
Coral Gables, Florid	ate and Zip
City, St	are and Zip
6. The name and address of the new registered ager	Idress a 33134 ate and Zip nt and/or office: q., c/o Becker & Poliakoff, P.A. me
Richard J. Alan Cahan, Esc	q., c/o Becker & Poliakoff, P.A.
Na	me am
121 Alhambra Plaza,	, 10th Floor
	P.O. Box NOT acceptable)
Coral Gables 1	FL 33134
City, Stat	e and Zip
and the business office of the registered agent will liability company, it is hereby confirmed that the clof the members of the limited liability company or or the operating agreement of the limited liability company or (Signature of a member or authorized representative of a member)  (Printed or typed name of signes)	e, the Florida street address of the registered office be identical. Or, in the case of a Florida limited hange(s) was/were authorized by an affirmative vote as otherwise provided in the articles of organization ompany.
I hereby accept the appointment as registered ages comply with the provisions of all statutes relative to and I am familiar with and accept the obligations of Chapter 608, F.S. Or, if this document is being file address, I hereby confirm that the limited liability of	nt and agree to act in this capacity. I further agree to the proper and complete performance of my duties, if my position as registered agent as provided for in the difference of the company has been notified in writing of this change.

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

(Signature of Registered Agent)