## L06000043893

(Req	uestor's Name)				
bbA)	lress)				
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(City	/State/Zip/Phone #)				
(Bus	iness Entity Name)				
(Document Number)					
Certified Copies	Certificates of Status				
Special Instructions to F	iling Officer:				
	K. L.K.				

Office Use Only



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CORPORATION SERVICE COMPANY	r.		<b>.</b>	THU ST	• 060EC	
	ACCOUNT NO.	:	072100000032	7	HAS IN	6
	REFERENCE	:	665422	8649A	SEC. R. P.	0
	AUTHORIZATION	:	J.X	7	LORD S2	
	COST LIMIT	:	\$ 25	Kend		
ORDER DATE :	December 14, 200	)6				
ORDER TIME :	10:46 AM					
ORDER NO. :	665422-010					
CUSTOMER NO:	8649A		,			
<b></b> -				<b></b>		-

CHANGE OF AGENT

NAME: CENTRAL LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY

 XXX
 PLAIN STAMPED COPY

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CONTACT PERSON: Harry B. Davis -- EXT# 2926

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EXAMINER:

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## 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: Central, LLC

2. The mailing address of the limited liability company is : 343 E. Broadway Avenue, Orlando, FL 32803

April 24, 1	20	)06
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3. Date of filing/registration in Florida

L06000043893 4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

> Michael S. Mauro, Sr. Name 343 E. Broadway Avenue

Orlando, FL 32803

City, State and Zip

Address

6. The name and address of the new registered agent and/or office:

Marc D. Page

Orlando

Name 2200 N. Forsythe Avenue, Unit A-2

Florida street address (P.O. Box NOT acceptable)

32807 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 office 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 vote of the members of the limited liability company or as otherwise provided in the artic es of organization or the operating agreement of the limited liability company.

ignature of a member or authorized representative of a member)

NAURO AC (Printed or typed name of signee)

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I amfauiliar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address of hereby confirm the limited liability company has been notified in writing of this change.

(Signature of Registered Agent)

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