L06000049101

(Rec	questor's Name)	
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Certified Copies	Certificates	of Status
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Arnold M. Zipper
Direct Dial: 954-703-3931
Direct Fax: 954-707-4549
arnold.zipper@fowlerwhite.com

June 10, 2010

VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl 32301

Re:

RWDI USA LLC;

Document number: L06000049101;

Statement of Change of Registered Office or Registered Agent or Both for Limited Liability

Company

Dear Sir or Madam:

Enclosed please find the Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company ("Statement of Change of RO and RA") for the above-referenced limited liability company along with a check in the amount of \$55.00 for the payment of the following:

\$25.00 filing fee to file the Statement of Change of RO and RA \$30.00 for a certified copy of the filed Statement of Change of RO and RA

Will you please send the certified copy of the filed Statement of Change of RO and RA to me at the following address:

Arnold M. Zipper Fowler White Boggs P.A. 1200 East Las Olas Blvd., Suite 400 Ft. Lauderdale, Florida 33301

Also, if you have any questions or need any additional information, please call me at 954.703.3931. Thank you for your time and assistance.

Sincerely,

Fowler White Boggs Banker P.A.

Arn d M. Zipper

Enclosures

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FOWLER WHITE BOGGS P.A.

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: RWDI USA LLC Name of Limite	d Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
Arnold M. Zipper, Esq.		
Name of Person		
Fowler White Boggs PA		
Firm/Company		
1200 East Las Olas Blvd., Suite 400		
Address		
Fort Lauderdale, FL 33301		
City/State and Zip Code		
arnold.zipper@fowlerwhite.com		
E-mail address: (to be used for future annual report notificati	on)	
For further information concerning this matter, ple	rase call:	
Arnold Zipperat(_		
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
Enclosed is a check for the following amo	ount:	
\$25 Filing Fee	X \$55 Filing Fee & Certified Copy	

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: RWDI USA LL	С
2. (a) Principal office address of limited liability company	RWDI USA LLC
(Note: MUST BE STREET ADDRESS)	10165 USA Today Way
	Miramar, FL 33025
(b) Mailing address of limited liability company:	RWDI USA LLC
(Note: MAY BE POST OFFICE BOX)	10165 USA Today Way
	Miramar, FL 33025
May 11, 2006	L06000049101
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State
Registered Agent:	Mark Chatten
Registered Office Address:	10165 USA Today Way Miramar, FL 33025
	mo i
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u>	V Registered Office address:
NEW Registered Agent:	Fowler White Boggs P.A.
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	c/o Arnold Zipper, Esq. 1200 East Las Olas Blvd., Suite 400 Fort Lauderdale ,FL 33301
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as otherwor the operating agreement of the limited liability company.	orida street address of the registered office cal. Or, in the case of a Florida limited was/were authorized by an affirmative vote vise provided in the articles of organization
Signature of a member or authorized representative of a member	•
James D. Parke	
Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the pro- and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company	ree to act in this capacity. I further agree to per and complete performance of my duties, itjon as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.

Signature of Registered Agent, Authorized Agent