## UNION0095647

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## COVER LETTER

INHS18 (8/05)

TO: Registration Secti Division of Corpo			
SUBJECT: DFM INVE		Liability Company)	<u> </u>
Dear Sir or Madam:			
The enclosed Registered	Agent/Registered Office C	hange and fee(s) are submitted	for filing.
Please return all correspo	ndence concerning this ma	tter to the following:	
Frank Walter White III			
(Na	me of Person)		
DFM Investments L.L	.C.		07 SE
4830 Albemarle Road			P 001 2
	Address)		SEE.
Charlotte, NC 28205	·		PHI2::  OF STAIL  E. FLORI
(City/St	ate and Zip Code)		DA DA
For further information co	oncerning this matter, pleas	se call:	
Frank Walter White III	at ( 70	)4 <sub>)</sub> 841 8475	
(Name of		(Area Code & Daytime T	elephone Number)
STREET/COURIL Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, Florida	n ations nter Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a che	ck for the following amou	int:	
[ ]\$25 Filing Fee		\$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. The name of the limited liability company is: DFM Investments, L.L.C. 2. The mailing address of the limited liability company is: 4830 Albemarle Road, Charlotte NC 28205 May 5th 2006 L06000095647 3. Date of filing/registration in Florida 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: Frank Walter White III Name 25755 SW 149 Ave Address Homestead, FL 33032 City, State and Zip 6. The name and address of the new registered agent and/or office: Frank Walter White III Name 10729 SW 104th Street Florida street address (P.O. Box NOT acceptable) Miami FL 33176 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 articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) Frank Walter White III (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 am familiar 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, I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent) Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00

INHS18 (8/05)