

Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850) 205-0380

Account Name : FALLACE & LARKIN. L.C.

Account Number : 12000000191 : (321)951-9900 Phone Fax Number : (321)724-6002

REGISTERED AGENT CHANGE

CAPITAL BLU MANAGEMENT, LLC

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H07000221249 3

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of Section 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statements in order to change its registered office or registered agent, or both, in the State of Florida.

- The name of the limited liability company is Capital Blu Management, LLC.
- The mailing address of the limited liability company is 709 S. Harbor City Blvd., Ste. 530, Melbourne, Florida 32901.
- Date of filing/registration in Florida was January 29, 2007, amended on March 2, 2007 and on August 29, 2007.
- The Document Number is £07000010523.
- 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State is:

Frederic E. Waczewski, Esq. 4700 Millenia Blvd., Ste. 175: Orlando, FL 32839

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

James H. Fallace 1900 S. Hickory Street, Ste. A Melbourne, FL 32901

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 Florid 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 Ogganization of the operating agreement of the limited liability company.

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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 dutis, 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)

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