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Florida Department of State

Division of Corporations Public Access System

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REGISTERED AGENT CHANGE

WESTCO PENSACOLA, LLC

Certificate of Status	0	
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Help

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

Pursuant to the provision liability company submit agent, or both, in the State	s ine joilowing statemet	or 608.508, F nt in order to c	Florida Statutes, the change its registered	undersigned limited l office or registered		
1. The name of the limited liability company is: Westco Pensacols, LLC						
2. The mailing address of the limited liability company is:						
200 Randolph Ave., Suite 200	Huntsville, AL 35801			*		
February 14, 2008		Lo	18000016155			
3. Date of filing/registrat	ion in Florida	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:						
	CORPORATION SERVIC	E COMPANY				
		Name				
	1201 HAYS STREET		·			
	•	Address		7 4 8		
	TALLAHASSIE, FL 3230	State and Zip		<u> </u>		
	-	-		全流 至。		
Address TALLAHASSEE, FL 32301 City, State and Zip 6. The name and address of the new registered agent and/or office:						
	C T Con	poration System				
		Varne				
Florida street address (P.O. Box NOT acceptable)						
Florida street address (P.O. Box NOT acceptable)						
	Pluntation	FL	33324	5		
	City, Si	tate 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.						
Jak L				4		
(Signature of a member or author	rized representative of a membe	r)				
Jada R. Leo (Printed or typed name of signee	<u></u>					
I hereby accept the appo comply with the provision and I am familiar with ar Chapter 508, F.S. Or, if address, I hereby confirm By: The case Box	•	gent and agree to the proper s of my position tiled to merely common bigs	to act in this capacit and complete perfor n as registered agent reflect a change in th been natified in writ Cli	ly, I further agree to mance of my duties, as provided for in the registered office ting of this change.		
701	ASSI on of Corporations, P.		etoru Fallahassee, FL 323			

FL013 - 09/09/2005 C T System Outline

INHS18 (8/05)