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COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| | TERBYS, LLC |
| Name of Limit | ted Liability Company |
| Dear Sir or Madam: | |
| The enclosed Registered Agent/Registered Office | e Change and fee(s) are submitted for filing. |
| Please return all correspondence concerning this | matter to the following: |
| BARBARA COENSON, ESQUIRE Name of Person | |
| COENSON LAW Firm/Company | · |
| 1301 S. International Parkway, Suite 1 Address | 041 |
| Lake Mary, FL 32746 City/State and Zip Code | ······································ |
| barbara@coensonlaw.com E-mail address: (to be used for future annual report notification) | ation) |
| For further information concerning this matter, p | lease call: |
| Barbara Coenson at (| (407) 322-8000 Area Code & Daytime Telephone Number |
| STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |
| Enclosed is a check for the following an | nount: |
| \$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.

| Name of the limited liability company: | BATERBYS, LLC |
|--|--|
| 2. (a) Principal office address of limited liability compan | y: |
| (Note: MUST BE STREET ADDRESS) | 9101 International Drive, Unit 1009 Orlando, Florida 32819 |
| (b) Mailing address of limited liability company: | • • • • • • • • • • • • • • • • • • • |
| (Note: MAY BE POST OFFICE BOX) | 37 N. Orange Avenue, Suite 500 Orlando, FL 32801 |
| 04/18/2008 | L08000039105 |
| 3. Date of filing/registration in Florida | 4. Document number |
| 5. (a) Registered Agent and Registered Office shown on | the records of the Florida Dept. of State: |
| Registered Agent: | Barbara Coenson |
| Registered Office Address: | 1540 International Parkway, Suite 200 Lake Mary, FL 32746 |
| (b) Enter name of <u>NEW Registered Agent</u> and/or <u>NE</u> <u>NEW</u> Registered Agent: <u>NEW</u> Registered Office Address: (MUST BE FLORIDA STREET ADDRESS) | W Registered Office address: Barbara Coenson, Esquire 1301 S. International Parkway, Ste. 1041 |
| (MUST BE PLUKIDA STREET ADDRESS) | Lake Mary ,FL 32746 |
| If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be identiability company, it is hereby confirmed that the change(s of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Richard Hart Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the province of the provisions of the provisions of the obligations of my possible to the provision of the provisions of the obligations of the provision of the province of the obligations of the provision of the provisions of the obligations of the provision of the provision of the obligations of the provision of the provision of the obligations of the provision of the provision of the obligations of the provision of th | laws of the State of Florida, it is hereby lorida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of granization |
| Signature of Registered Agent | |