Division of Corporations

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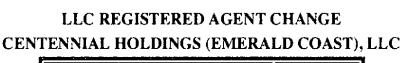
From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

l. Na	ame of the limited liability company:	HOLDI	NGS (EM	ERALD COAST), LLC
. (a)	482 S Keller Road		(b) 482 S	S Keller Road
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		(")	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	3rd Floor		3rd F	Toor
	Orlando, FL 32810		Orlan	ndo, FL 32810
	11/09/2009		L09000	0108297
	Date of filing/registration in Florida	4.		Document number
5. (a)	GONZALEZ, FRANK D., ESQ.			nut.
. (u)	Registered Agent and Registered Office shown on the records o	fthe Flo	rida Dept. o	of State:
(b)	C/O The Children's Home Society of Florida			21 J
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)		FILI SLULLARSS	
	482 S Keller Road. 3rd Floor			FILED ASSEE ASSEE
	Orlando , F	32810	)	WHIO: 44
	Corporate Creations Network Inc.  Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered</u>	od ()Mor	addens:	
		u Onk	<u> Ация Сээ</u> .	
	801 US Highway 1  NEW Registered Office Address:		<del></del>	
	North Palm Beach	L 33408	3	
the b	imited liability company is not organized under the la			of Florida, it is hereby confirmed that after th
hange gent v 'as/wo	or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited light authorized by an affirmative vote of the members cles of organization or the operating agreement of the	e regist iability of the	ered offic company limited lia	ce and the business office of the registered y, it is hereby confirmed that the change(s) ability company or as otherwise provided in
	<del></del>	S	ean Arno,	Attorney-in-Fact
herei	ture of a member or authorized representative of a member by accept the appointment as registered agent and ag	ree to	act in this	Printed or typed name of signee comply with the
rovisi ie obl mere	ons of all statutes relative to the proper and complete igations of my position as registered agent as provide ly reflect a change in the registered office address, I d in writing of this change.	perfoi d for i hereby	mance of n Chapter confirm	(my duties, and I am familiar with and accept to 605, F.S. Or, if this document is being filed that the limited liability company has been
<u> </u>	Sean Arno, Special Secretary			